ill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this is ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Aric First name Richard Middle name Montgomery Last name and Suffix (Sr., Jr., II, III)	Charity First name Ann Middle name Montgomery Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		Charity Ann LeBaron Charity Ann Govier Charity Ann Davis Charity Ann Honeycutt
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3435	xxx-xx-6326

Case 22-50527 Doc 1 Filed 09/13/22 Page 2 of 82

Debtor 1 Aric Richard Montgomery
Charity Ann Montgomery Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EIN	EIN		
5.	Where you live	164 Lamore Court Winston Salem, NC 27107	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Davidson			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 22-50527 Doc 1 Filed 09/13/22 Page 3 of 82

	btor 1 btor 2	Aric Richard Mont Charity Ann Monto					Case number (if known)		
Par	rt 2:	Tell the Court About \	our Bank	ruptcy C	ase				
7.	Bank	chapter of the cruptcy Code you are				ch, see <i>Notice Required by</i> and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bankru te box.	ptcy	
	choo	sing to file under	☐ Chapter 7						
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			■ Chap	ter 13					
8.	How	you will pay the fee	ab ord	out how y	ou may pay. Typically rattorney is submitting	, if you are paying the fee yo	ck with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che	money	
			☐ In	eed to pa	y the fee in installme ee in Installments (Off	ents. If you choose this opti	on, sign and attach the Application for Individuals to	o Pay	
			□ I re	equest the	at my fee be waived quired to, waive your f	(You may request this option ee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judgo our income is less than 150% of the official poverty	line that	
							n installments). If you choose this option, you must cial Form 103B) and file it with your petition.	fili out	
9.		you filed for cruptcy within the	■ No.						
		3 years?	☐ Yes.						
				District			Case number		
				District			Case number		
				District		When	Case number		
10.		any bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.						
				Debtor			Relationship to you		
				District		When	Case number, if known		
				Debtor			Relationship to you		
				District		When	Case number, if known		
11.	-	ou rent your lence?	■ No.	Go to	line 12.				
	16310	lence:	☐ Yes.	Has y	our landlord obtained	an eviction judgment agains	st you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial</i> S this bankruptcy petit		Judgment Against You (Form 101A) and file it as p	art of	

Case 22-50527 Doc 1 Filed 09/13/22 Page 4 of 82

		Aric Richard Mont Charity Ann Mont				Case number (if known)	
Par	t 3: R	eport About Any Bu	sinesses	You Owr	ı as a Sole Propriet	or	
12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Go to Part 4.							
			☐ Yes.	Name	and location of busi	iness	
	busine an indi separa as a co	proprietorship is a ss you operate as vidual, and is not a ite legal entity such orporation, rship, or LLC.		Name of business, if any			
If you have more than one sole proprietorship, use a			e & ZIP Code				
		ite sheet and attach s petition.		Chec	k the appropriate box	x to describe your business:	
		-				ess (as defined in 11 U.S.C. § 101(27A))	
						Estate (as defined in 11 U.S.C. § 101(51B))	
					· ·	efined in 11 U.S.C. § 101(53A))	
					,	r (as defined in 11 U.S.C. § 101(6))	
					None of the above		
Chapter 11 of the proceed under Subchapter V so you are choosing to proceed under Subchapter V. So			under Subhoosing to stateme (B).	bchapter V so that it o proceed under Sub nt, and federal incom	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debto behapter V, you must attach your most recent balance sheet, statement of operatine tax return or if any of these documents do not exist, follow the procedure in 11 ter 11.	or or ions,	
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankru	ıptcy
			☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Cood under Subchapter V of Chapter 11.	le, and
			☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, Subchapter V of Chapter 11.	and I
Par	t 4: R	eport if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention	
14.		u own or have any	■ No.				
	allege of imn	rty that poses or is d to pose a threat ninent and liable hazard to	☐ Yes.	What is	the hazard?		
	public Or do prope	health or safety? you own any tty that needs liate attention?			liate attention is why is it needed?		
	perisha livesto or a bu	ample, do you own able goods, or ck that must be fed, uilding that needs repairs?		Where is	s the property?		
						Number, Street, City, State & Zip Code	

Debtor 1 Aric Richard Montgomery
Debtor 2 Charity Ann Montgomery

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 22-50527 Doc 1 Filed 09/13/22 Page 6 of 82

	tor 1 Aric Richard Mont tor 2 Charity Ann Mont				Case number <i>(if k</i> r	nown)		
Par	6: Answer These Quest	ions for R	eporting Purposes					
	What kind of debts do you have?	16a.				n 11 U.S.C. § 101(8) as "incurred by an		
	,		□ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain					
			money for a business or investmen	nt or through the operatio	n of the business	s or investment.		
			☐ No. Go to line 16c.					
		16c.	☐ Yes. Go to line 17. State the type of debts you owe th	at are not consumer debt	te or hueingee del	hte		
		100.		at are not consumer debt	is of business def			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			is excluded and administrative expenses		
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured		Yes					
	creditors?							
18.	How many Creditors do you estimate that you owe?	1 -49		□ 1,000-5,000		1 25,001-50,000		
		□ 50-99		☐ 5001-10,000 ☐ 10,001-25,000		☐ 50,001-100,000 ☐ More than100,000		
_		□ 100-1 □ 200-9	100			in More than 100,000		
19.	How much do you	□ \$0 - \$50,000		□ \$1,000,001 - \$10 mil		□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500		☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 mil	llion	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million			☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		— \$500,	001 - \$1 IIIIII0II					
Par	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out thi document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				attorney to help me fill out this				
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					I in this petition.			
						perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519,		
			Richard Montgomery chard Montgomery		arity Ann Mon ty Ann Montgo			
			e of Debtor 1		ure of Debtor 2	лны у		
		Executed	d on September 13, 2022	Execut	ted on Septem	nber 13, 2022		
			MM / DD / YYYY		MM / DD			

Case 22-50527 Doc 1 Filed 09/13/22 Page 7 of 82

D. I Ania Diahand Man	4		9/13/	22 12:38PM
Debtor 1 Aric Richard Mon Charity Ann Mon	•	Case	e number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ted States Code, and have e	xplained the relief available under each ch	napter
If you are not represented by	and, in a case in which § 707(b)(4)(D) applies	s, certify that I have no know	ledge after an inquiry that the information	in the
an attorney, you do not need to file this page.	schedules filed with the petition is incorrect.			
	/s/ Damon T. Duncan	Date	September 13, 2022	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Damon T. Duncan			
	Printed name			
	Duncan Law, LLP			
	Firm name			
	628 Green Valley Rd. #304			
	Greensboro, NC 27408			
	Number, Street, City, State & ZIP Code			
			DamonDuncan@DuncanLawO	nline.c
	Contact phone 336-856-1234	Email address	om	

39650 NC Bar number & State

					9/13/22 12:38PM
Fill in	this inform	ation to identify your case:			
Debto	r 1	Aric Richard Montgomery			
		First Name Middle Name Last Name			
Debto	r 2 e if, filing)	Charity Ann Montgomery First Name Middle Name Last Name			
United	d States Ban	okruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA			
	number				
(if know	n)			Check if thi	
				amended fi	lling
Office 1	cial For	<u>m 106Sum</u>			
Sum	mary of	f Your Assets and Liabilities and Certain Statistical Information		12/1	5
inform	ation. Fill o	nd accurate as possible. If two married people are filing together, both are equally responsible for the first all of your schedules first; then complete the information on this form. If you are filing amend as, you must fill out a new <i>Summary</i> and check the box at the top of this page. **Trize Your Assets**			
raiti	. Julillia	IIIZE TOUT ASSETS		Your assets	
1. 5	Schodulo A/	B: Property (Official Form 106A/B)			•
		e 55, Total real estate, from Schedule A/B		\$	229,210.00
1	b. Copy line	e 62, Total personal property, from Schedule A/B		\$	94,859.20
1	c. Copy line	63, Total of all property on Schedule A/B		\$	324,069.20
Part 2	Summa	rize Your Liabilities			
			,	Your liabilit	ios
				Amount you	
		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		\$	298,304.88
3. 5	Schedule F/F	F: Creditors Who Have Unsecured Claims (Official Form 106E/F)			
		e total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
3	Bb. Copy the	e total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	131,192.52
				<u> </u>	,
		Your total liabilities	\$	4	29,497.40
			_		20,407.40
Part 3	Summa	arize Your Income and Expenses			
raits	. Julillia	inze rour income and Expenses			
		Your Income (Official Form 106I) ombined monthly income from line 12 of Schedule I		\$	13,768.53
		Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J		\$	5,343.00
Part 4	Answer	r These Questions for Administrative and Statistical Records			
6. A	-	g for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur ot	her schedul	es.
7. V	■ Yes Vhat kind o	f debt do you have?			
	■ Your de	ebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a ne	rsonal fami	lv. or
	househo	old purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	·		
	Your de	ebts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	s box	and submit	t this form to

	Aric Richard Montgomery		
Debtor 2	Charity Ann Montgomery	Case number (if known)	
	the court with your other schedules.		

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$____6,749.73

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	38,367.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	38,367.00

Case 22-50527 Doc 1 Filed 09/13/22 Page 10 of 82

Fill in this in	nformation to iden	tify your case and t	nis filing:		9/13/22 12:38F
Debtor 1			<u> </u>		
Deptor 1	First Name	ard Montgomery Middl	e Name Last Name		
Debtor 2		nn Montgomery			
(Spouse, if filing)) First Name	Middl	e Name Last Name		
United State	s Bankruptcy Court	for the: MIDDLE D	ISTRICT OF NORTH CAROLINA		
Case number	er				☐ Check if this is an amended filing
Official	Form 106A	./B			
	ule A/B:				12/15
think it fits be- information. If Answer every	st. Be as complete a more space is need question.	nd accurate as possib ed, attach a separate s	an asset only once. If an asset fits in more than one le. If two married people are filing together, both are heet to this form. On the top of any additional pages ther Real Estate You Own or Have an Interest In	equally responsible for s	upplying correct
1. Do you owi	n or have any legal o	r equitable interest in	any residence, building, land, or similar property?		
□ No. Go to	, ,	4			
_					
■ Yes. Wh	nere is the property?				
1.1			What is the property? Check all that apply		
	amore Court			Da wat daduat a sawad al	-i Dut
	dress, if available, or othe	r description	■ Single-family home □ Duplex or multi-unit building	Do not deduct secured cl the amount of any secure	
			Condominium or cooperative	Creditors Who Have Clair	ms Secured by Property.
187		0 07407 0000	Manufactured or mobile home	Current value of the	Current value of the
	on Salem No		Land	entire property?	portion you own?
City	Sta	ate ZIP Code	☐ Investment property☐ Timeshare	\$229,210.00	\$229,210.00
			Other		your ownership interest nancy by the entireties, or
			Who has an interest in the property? Check one	a life estate), if known.	44
ъ			Debtor 1 only	Tenancy by the Er	itirety
David	son		Debtor 2 only		
County			Debtor 1 and Debtor 2 only	☐ Check if this is cor	nmunity property
			☐ At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this iter property identification number:	n, such as local	
			Value Determined by County Tax Reco	ords	
		•	or all of your entries from Part 1, including any	 	\$229,210.00
•					
Part 2: Desc	cribe Your Vehicles				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto		ric Richard Me Charity Ann Mo			Case number (if known)	
3. Ca	rs, vans,	trucks, tractors	s, sport utility vel	hicles, motorcycles		
	No					
• \	Yes					
3.1	Other inf VIN #: Include Value	Kia Sportage 2022 nate mileage: formation: KNDPM3AC2Nes: N/A Determined by Clean Retail V	90% of	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$27,360.00
3.2	Other inf VIN #: Include Power Value	Toyota Sienna 2019 mate mileage: formation: 5TDXZ3DC2K es: Rear Parki Sunroof Determined by Clean Retail V	ng Sensors, v 90% of	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$30,667.50
3.3	Other inf VIN #: Include Value	Toyota Tundra 2017 nate mileage: formation: 5TFRM5F11H2 es: 4.6L V8 En Determined by Clean Retail V	gine 90% of	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$27,337.50
Example 5 Acc. part 3	mples: B	oats, trailers, mo ollar value of the have attached f be Your Personal	tors, personal wa e portion you ow or Part 2. Write t and Household Ite	d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycon for all of your entries from Part 2, including that number here	g any entries for	\$85,365.00 Current value of the portion you own?
6. Ho	usehold	goods and furn	ishings			Do not deduct secured claims or exemptions.
				china, kitchenware		

Official Form 106A/B Schedule A/B: Property page 2

☐ No

Case 22-50527 Doc 1 Filed 09/13/22 Page 12 of 82

Debtor 1 Debtor 2		Montgomery Montgomery Cas	se number (if known)
■ Yes.	Describe		
		Household Goods & Furnishings: Three Twin Beds and Mattresses, Coffee Table	
		Value Determined by Used Replacement Cost Joint	\$3,500.00
		Household Goods and Furnishings: Stove, Dishwasher,	
		Refrigerator Value Determined by Used Replacement Cost Joint	\$500.00
		Household Goods & Furnishings: Mattress	
		Value Determined by Used Replacement Cost Joint	\$150.00
		Household Goods & Furnishings: Living room, dining room, kitchen, bedrooms and any other miscellaneous household goods and furnishings Value Determined by Used Replacement Cost	
		Joint	\$1,200.00
■ Yes.	Describe	Televisions, radios, computers, DVD player and DVDs, table phones, game consoles and other miscellaneous electronic	
		Value Determined by Used Replacement Cost Joint	\$500.00
Example ■ No		figurines; paintings, prints, or other artwork; books, pictures, or other art cons, memorabilia, collectibles	objects; stamp, coin, or baseball card collections;
Examp	nent for sports and les: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and kayaks; carpentry tools;
		Miscellaneous sports and hobby equipment Value Determined by Debtor's Best Estimate Joint	\$50.00
□ No		s, shotguns, ammunition, and related equipment	

Debtor 1 Debtor 2	Aric Richard Montgomery Charity Ann Montgomery	Case number (if known)	
	Primary Firearm & Any Miscellaneous Ammunit	tion and	
	Accessories: Aero Precision AR 15		
	Value Determined by Debtor's Best Estimate Debtor 1		\$300.00
	Desici 1		
	Secondary Firearm & Any Miscellaneous Ammu	unition and	
	Accessories: Tarus PT709	difficition and	
	Value Determined by Debtor's Best Estimate		
	Debtor 1		\$150.00
44 Clasha			
11. Clothe Exam	es <i>oples:</i> Everyday clothes, furs, leather coats, designer wear, shoes, accessorie	98	
☐ No			
Yes.	. Describe		
	Discouling the second s		
	Debtor 1's Wearing Apparel & Clothing Value Determined by Used Replacement Cost		
	Debtor 1		\$500.00
	-		
	Debtor 2's Wearing Apparel & Clothing		
	Value Determined by Used Replacement Cost		
	Debtor 2		\$750.00
■ Yes.	Wedding Jewelry Value Determined by Used Replacement Cost		6200 00
	Debtor 2		\$300.00
<i>Exam</i> □ No	arm animals nples: Dogs, cats, birds, horses Describe		
	Cats		
	Value Determined by Debtor's Best Estimate Joint		\$50.00
	John		
	Dogs		
	Value Determined by Debtor's Best Estimate		
	Joint		\$50.00
■ No	ther personal and household items you did not already list, including ar . Give specific information	ny health aids you did not list	
15 8시리	the dellar value of all of your entries from Part 2 including any entries 5	for pages you have attached	
	the dollar value of all of your entries from Part 3, including any entries f Part 3. Write that number here		0.00

Part 4: Describe Your Financial Assets

Case 22-50527 Doc 1 Filed 09/13/22 Page 14 of 82

Debtor 1 Debtor 2	Aric Richard Montgo Charity Ann Montgo			Case number (if known)	
Do you ov	wn or have any legal or e	quitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	oles: Money you have in yo	-	me, in a safe deposit box, and on	hand when you file your petition	า
				Cash on Hand Value Determined by Actual Cash Value Joint	\$50.00
<i>Exam_l</i> □ No	institutions. If you have		unts; certificates of deposit; share with the same institution, list each		ouses, and other similar
■ Yes.		Checking	Institution name: Checking Account #1 Name of Bank: USAA Last Four of Account a	#: 4852	\$36.20
	17.2.		Checking Account #2 Name of Bank: USAA Last Four of Account and Non-Filing P Cousin)		\$231.34
	17.3.	Checking	Checking Account #3 Name of Bank: USAA Last Four of Account : Joint and Non-Filing P Parents)	_	\$0.66
	17.4.	Checking	**EMPTY** Checking Account #4 Name of Bank: USAA Last Four of Account in Joint and Non-Filing P		\$0.00
	17.5.	Savings	Savings Account #1 Name of Bank: PenFed Last Four of Account a Joint		\$5.00
Exam _l ■ No			kerage firms, money market acco	ounts	
	ublicly traded stock and venture	interests in incorpo	orated and unincorporated busi	nesses, including an interest	in an LLC, partnership, and
☐ Yes.	Give specific information Nar	about themne of entity:		% of ownership:	

Case 22-50527 Doc 1 Filed 09/13/22 Page 15 of 82

9/13/22 12:38PM

	Aric Richard N ebtor 2 Charity Ann M		Case number (if known)	
20.	Negotiable instruments in	clude personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	■ No □ Yes. Give specific inform	nation about them Issuer name:		
	Retirement or pension a Examples: Interests in IRA No		103(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	Yes. List each account s		A constraint	
		Type of account:	Institution name:	
		403(b)	Plan Administrator: Principal Employer: Hospice of Surry County Value Determined by Debtor(s) Most Recent Statement *ERISA Qualified* 100% of Fair Market Value Exempted	
			Debtor 2	\$1,171.00
22.		deposits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies Institution name or individual:	s, or others
23.	Annuities (A contract for a ■ No	a periodic payment of mone	ey to you, either for life or for a number of years)	
		er name and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 529 ■ No	IRA, in an account in a q 9A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition programing a qualified state a qualified s	am.
	· · ·	tution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future ■ No	re interests in property (o	other than anything listed in line 1), and rights or powers exerci	sable for your benefit
	Yes. Give specific inform	mation about them		
		n names, websites, procee	nd other intellectual property eds from royalties and licensing agreements	
	Licenses, franchises, an	d other general intangible		
	Examples: Building permi■ No□ Yes. Give specific information		perative association holdings, liquor licenses, professional licenses	
M	oney or property owed to	vou?		Current value of the
	oney of property office to	you.		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you ■ No	ı		
	_	nation about them, including	g whether you already filed the returns and the tax years	

Official Form 106A/B Schedule A/B: Property page 6

Case 22-50527 Doc 1 Filed 09/13/22 Page 16 of 82

	ebtor 1 ebtor 2	Aric Richard M Charity Ann M		Case number (if known)	
29.		support oles: Past due or lur	np sum alimony, spousal support, child support, mair	ntenance, divorce settlement, property s	settlement
	■ No				
	☐ Yes.	Give specific inform	nation		
	Examp _		e owes you , disability insurance payments, disability benefits, sidid loans you made to someone else	ck pay, vacation pay, workers' compens	sation, Social Security
	■ No □ Yes.	Give specific inforr	nation		
		sts in insurance po oles: Health, disabili	vilicies ty, or life insurance; health savings account (HSA); c	redit, homeowner's, or renter's insuranc	ce
		Name the insurance	e company of each policy and list its value.		
			Company name:	Beneficiary:	Surrender or refund value:
			Whole Life Insurance Policy - No Cash Surrender Value Value Determined by Cash Surrender Amount on Recent Statement		
			Debtor 1	Debtor 2	\$0.00
			Term Life Insurance Policy **Notice Only, No Cash Surrender Value** Debtor 2	Debtor 1	\$0.00
	If you a someo		that is due you from someone who has died of a living trust, expect proceeds from a life insurance mation	policy, or are currently entitled to recei	ve property because
33.			ies, whether or not you have filed a lawsuit or ma oloyment disputes, insurance claims, or rights to sue	de a demand for payment	
		Describe each clai	m		
	Other o	contingent and un	liquidated claims of every nature, including count	terclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each clai	m		
	Any fin ■ No	nancial assets you	did not already list		
	☐ Yes.	Give specific inform	nation		
36			all of your entries from Part 4, including any entri	. • •	\$1,494.20
Pa	rt 5: Des	scribe Any Business	-Related Property You Own or Have an Interest In. List a	ny real estate in Part 1.	
37		<u> </u>	Il or equitable interest in any business-related property?		
	-	o to Part 6.	o. oquitable interest in any business-related property?		
		Go to line 38.			

Case 22-50527 Doc 1 Filed 09/13/22 Page 17 of 82

9/13/22 12:38PM

	tor 1 tor 2					
Part		scribe Any Farm- and Commercial Fishing-Related Property ou own or have an interest in farmland, list it in Part 1.	You Owr	or Have an Interes	st In.	
46. I	Do you	own or have any legal or equitable interest in any fa	rm- or c	ommercial fishir	ng-related property?	
	No. 0	Go to Part 7.				
	☐ Yes.	Go to line 47.				
Part	7:	Describe All Property You Own or Have an Interest in That	You Did	Not List Above		
53. I	•	have other property of any kind you did not already les: Season tickets, country club membership	list?			
	No					
	Yes. (Give specific information				
54.	Add tl	ne dollar value of all of your entries from Part 7. Write	e that n	umber here		\$0.00
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	: Total real estate, line 2				\$229,210.00
56.	Part 2	: Total vehicles, line 5		\$85,365.00		
57.	Part 3	: Total personal and household items, line 15		\$8,000.00		
58.	Part 4	: Total financial assets, line 36		\$1,494.20		
59.	Part 5	: Total business-related property, line 45		\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7	: Total other property not listed, line 54	+	\$0.00		
62.	Total	personal property. Add lines 56 through 61		\$94,859.20	Copy personal property to	sal \$94,859.20
63.	Total	of all property on Schedule A/B. Add line 55 + line 62				\$324,069.20

Official Form 106A/B Schedule A/B: Property page 8

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA

	MIDDLE DIS	IRICI OF NORTH CAROLINA		
In the Matter of: Aric Richard Montgomery Charity Ann Montgomery) Case No.		
) DEBTOR'S CLAIM F	FOR PROPERTY EXEM	MPTIONS
	Debtor.)		
domicile was located in No domicile was not located in immediately preceding the information, please refer to	rth Carolina for the 730 days a single state for those 730 d 730-day period or for a longe	cial Form 106C (Schedule 'C') to cl immediately preceding the date of the lays, but your domicile was located in propertion of such 180-day period that ited States Bankruptcy Court for the forms/bankruptcy-forms.	ne filing of the petition, n North Carolina for 18 n in any other place. For	or (2) your 30 days or more
		hereby claim the following property a Carolina, and non-bankruptcy fede		11 U.S.C. §
Select appropriate of Total net v	Debtor as tenant by the entire Market Value	(Debtor is unmarried, 65 years of ag eties or joint tenant with rights of sur Mtg. Holder or Lien Holder(s)		
Salem, NC 27107 Davidso County	on			
Value Determined by Cou Tax Records Joint	nty 229,210.00	Flagstar Bank, FSB Flagstar Bank, FSB	170,407.90 39,457.65	19,344.45
(ion, not to exceed \$5,000. carried forward and used to claim owned by the Debtor. (NCGS	\$ 3	9,344.45 0,000.00 5,000.00
		ving property is claimed as exempt pg to property held as tenants by the		522(b)(3)(B) and
Description of Property & Address -NONE-	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
3. MOTOR VEHICI exempt not to exce		Only one vehicle allowed under this	paragraph with net valu	ne claimed as
Year, Make, Model of Auto	Market Value	Lien Holder(s)	Amt. Lien	Net Value

91C (4/21) Year, Make, Model of Auto 2017 Toyota Tundra 40,000 miles VIN #: 5TFRM5F11HX122068 Includes: 4.6L V8 Engine Value Determined by 90% of NADA Clean Retail Value	Market Value	Lien Holder	(s)		Amt. Lien	Net Value
Joint Value	27,337.50	Ally Bank			16,115.00	11,222.50
(a) Statutory allowance			\$	3,500		
(b) Amount from 1 (b) above to be used in this paragraph (A part or all of 1 (b) may be used as needed.)		oh.	\$	2,111.15		
	Total N	let Exemption	\$	5,611.15		

4. **TOOLS OF TRADE, IMPLEMENTS, OR PROFESSIONAL BOOKS.** (NCGS 1C-1601(a)(5). Used by Debtor or Debtor's dependent. Total net value of all items claimed as exempt not to exceed \$2,000.)

Description Valu		(s)	An	nt. Lien	Net Value
(a) Statutory allowance		\$	2,000		
(b) Amount from 1 (b) above to be used in this parage (A part or all of 1 (b) may be used as needed.)	graph.	\$			
Tota	al Net Exemption	\$	0.00		

5. **PERSONAL PROPERTY USED FOR HOUSEHOLD OR PERSONAL PURPOSES NEEDED BY DEBTOR OR DEBTOR'S DEPENDENTS.** (NCGS 1C-1601(a)(4). Debtor's aggregate interest, not to exceed \$5,000 in value for the Debtor plus \$1,000 for each dependent of the Debtor, not to exceed \$4,000 total for dependents.)

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
Debtor 1's Wearing Apparel & Clothing Value Determined by Used Replacement Cost Debtor 1	500.00			500.00
Household Goods & Furnishings: Three Twin Beds and Mattresses, Coffee Table Value Determined by Used Replacement Cost Joint	3,500.00	Badcock Home Furniture &	3,712.65	0.00
Household Goods &	3,300.00	- Indic		0.00
Furnishings: Mattress Value Determined by Used Replacement Cost Joint	150.00	Vive	2,292.43	0.00
Household Goods & Furnishings: Living room, dining room, kitchen, bedrooms and any other miscellaneous household goods and furnishings Value Determined by Used Replacement Cost				
Joint	1,200.00			1,200.00

	Market				Net
Description	Value	Lien Holder(s)		Amt. Lien	Value
Household Goods and					
Furnishings: Stove, Dishwasher, Refrigerator					
Value Determined by Used					
Replacement Cost					
Joint	500.00	Conn's, Inc.		2,082.88	0.00
Miscellaneous sports and					
hobby equipment Value Determined by Debtor's					
Best Estimate					
Joint	50.00				50.00
Primary Firearm & Any					
Miscellaneous Ammunition					
and Accessories: Aero					
Precision AR 15 Value Determined by Debtor's					
Best Estimate					
Debtor 1	300.00				300.00
Televisions, radios,					
computers, DVD player and					
DVDs, tablets, phones, game					
consoles and other miscellaneous electronics					
Value Determined by Used					
Replacement Cost					
Joint	500.00				500.00
				Total Net Value	2,550.00
(a) Statutory allowance for Dahtor		•	8	5,000	
(a) Statutory allowance for Debtor(b) Statutory allowance for Debtor			P	3,000	
\$1,000 each (not to exceed \$4,000)		iependents at	4.	000.00	
(c) Amount from 1(b) above to be		h			
(A part or all of 1 (b) may be u	1 - 1				
(11 pairt of all of 1 (b) may be a	isea as necaea.)				
			Tota	l Net Exemption	1,675.00
	100.10.1001//6	1 4 2 1 37 0 2		II G ()	
6. LIFE INSURANCE. (NC	GS 1C-1601(a)(6) and	d Article X, Section	on 5 of North Ca	rolina Constitution.)	
Name of Insurance Compar	nv\Policy No \Name o	of Insured\Policy I	Date\Name of Be	eneficiary	
Whole Life Insurance Poli			rate it tallie of Bo	one netary	
	d by Cash Surrender		nt Statement		
Debtor 1					
Beneficiary: Debt	or 2				
7. PROFESSIONALLY PR	ESCRIBED HEALT	TH AIDS (FOR D	ERTOR OR D	ERTOR'S DEPENDENT	S)
(NCGS 1C-1601(a)(7). No		III AIDS (FOR D	LDION ON D	EDIOR S DEI ENDENT	<i>5)</i> •
(1,002 10 1001(u)(,),110	minu on varaci,				
Description:					
-NONE-					
B. DEBTOR'S RIGHT TO	RECEIVE FOLLOV	WING COMPEN	SATION: (NCC	GS 1C-1601(a)(8). No limi	t on number or
amount.)					
	ompensation for personuities.	onal injury, includi	ng compensation	n from private disability po	olicies or
	ompensation for deat	h of person of who	m Debtor was d	anandant for support	

-NONE-

Detailed Description -NONE-	Value
COLLEGE SAVINGS PLANS QUALIFIED UNDER SECTION (NCGS 1C-1601(a)(10). Total net value not to exceed \$25,000 and n plan within the preceding 12 months, except to the extent any of the Debtor's financial affairs and were consistent with Debtor's past patt extent that the funds are for a child of Debtor and will actually be use	hay not include any funds placed in a college save contributions were made in the ordinary course of ern of contributions. This exemption applies only
Detailed Description -NONE-	Value
RETIREMENT BENEFITS UNDER A RETIREMENT PLAN OUNITS OF OTHER STATES, TO THE EXTENT THOSE BENEFITHAT STATE OR GOVERNMENTAL UNIT. (NCGS 1C-1601)	EFITS ARE EXEMPT UNDER THE LAWS (

13. ANY OTHER REAL OR PERSONAL PROPERTY WHICH DEBTOR DESIRES TO CLAIM AS EXEMPT THAT HAS NOT PREVIOUSLY BEEN CLAIMED ABOVE. (NCGS 1C-1601(a)(2). The amount claimed may not exceed the remaining amount available under paragraph 1(b) which has not been used for other exemptions.)

	Market			Net	Value Claimed as
Description	Value	Lien Holder(s)	Amt. Lien	Value	Exempt
2017 Toyota Tundra 40,000 miles					
VIN #:					
5TFRM5F11HX122068 Includes: 4.6L V8					
Engine					
Value Determined by					
90% of NADA Clean Retail Value					
Joint	27,337.50	Ally Bank	16,115.00	11,222.50	2,111.25
2019 Toyota Sienna					
90,000 miles VIN #:					
5TDXZ3DC2KS999196					
Includes: Rear Parking Sensors, Power					
Sunroof					
Value Determined by					
90% of NADA Clean Retail Value					
Joint	30,667.50	PenFed Credit Union	45,032.37	0.00	0.00

)10 (!/ 2 1)				.	Value
Decarintion	Market	Lion Holdon(a)	Amt. Lien	Net	Claimed as
Description 2022 Kia Sportage 20,000 miles	Value	Lien Holder(s)	Amt. Lien	Value	Exempt
20,000 miles VIN #:					
KNDPM3AC2N7995389					
Includes: N/A Value Determined by					
90% of NADA Clean					
Retail Value Joint	27,360.00	Wells Fargo Bank, National Association	19,204.00	8,156.00	2,525.98
Cash on Hand		- Mational Accordation			
Value Determined by					
Actual Cash Value Joint	50.00			50.00	25.00
Cats					
Value Determined by					
Debtor's Best Estimate	50.00			50.00	25.00
Joint Checking: **EMPTY**					
Checking Account #4					
Name of Bank: USAA					
Last Four of Account #: 2786					
Joint and Non-Filing	0.00			0.00	0.00
Person Checking: Checking	0.00			66% owned	0.00
Account #1					
Name of Bank: USAA					
Last Four of Account #: 4852					
Joint	36.20			36.20	18.10
Checking: Checking					
Account #3 Name of Bank: USAA					
Last Four of Account #:					
2404					
Joint and Non-Filing Person (Debtor 1's				0.66	
Parents)	1.00			66% owned	0.33
Checking: Checking					
Account #2 Name of Bank: USAA					
Last Four of Account #:					
7193					
Joint and Non-Filing Person (Debtor 1's				231.34	
Cousin)	350.51			66% owned	116.84
Dogs					
Value Determined by Debtor's Best Estimate					
Joint	50.00			50.00	25.00
Savings: Savings					
Account #1 Name of Bank: PenFed					
Credit Union					
Last Four of Account #:					
4012 Joint	5.00			5.00	2.50

DATE September 13, 2022

91C (4/21)	Market				Net	Value Claimed as
Description	Value	Lien Holder(s)	Amt. Li	en	Value	Exempt
Secondary Firearm & Any Miscellaneous Ammunition and Accessories: Tarus PT709 Value Determined by Debtor's Best Estimate Debtor 1 Term Life Insurance	150.00				150.00	150.00
Policy **Notice Only, No Cash Surrender Value** Debtor 2						
Beneficiary: Debtor 1	0.00				0.00	1.00
(a) Total Net Value of proper	rty claimed in par	agraph 13.		\$	8,72	29.20
(b) Total amount available fr	om paragraph 1(b	o).		\$	5,0	00.00
(c) Less amounts from paragraph						
	Paragra		\$ 2,111.15			
	Paragra Paragra		\$ \$			
	1 aragra		ailable from paragraph 1(b)	\$	2,8	88.85
			Total Net Exemption	\$		88.85
14. OTHER EXEMPT	IONS CLAIMEI	O UNDER THE LA	AWS OF THE STATE OF	NORTH	CAROLINA:	
-NONE-						
TOTAL VALUE OF PR	OPERTY CLAIN	MED AS EXEMPT			\$	0.00
15. EXEMPTIONS CL	AIMED UNDER	R NON-BANKRUI	PTCY FEDERAL LAW:			
-NONE-						
TOTAL VALUE OF PR	OPERTY CLAIN	MED AS EXEMPT			\$	0.00
16. RECENT PURCHASES	}					
The exemptions provided in N purchased by the Debtor less bankruptcy, unless the purcha and no additional property wa	than 90 days precuse of the property	eding the initiation is directly traceable	of judgment collection proce e to the liquidation or conve	eedings or	the filing of a	petition for
List tangible personal propert	• •	e Debtor less than 9 Market	90 days preceding the filing	of the banl	kruptcy petitior	n: Net
Description -NONE-			(older(s)	Am	t. Lien	Value

/s/ Aric Richard Montgomery
Aric Richard Montgomery

Debtor

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA

	MIDDLE DIS	TRICT OF NORTH CAROLINA		
In the Matter of: Aric Richard Montgomery Charity Ann Montgomery) Case No.		
) DEBTOR'S CLAIM F	FOR PROPERTY EXE	EMPTIONS
	Debtor.)		
DE		FOR PROPERTY EXEMP	PTIONS	
domicile was located in North Card domicile was not located in a singl immediately preceding the 730-day	olina for the 730 days e state for those 730 d y period or for a longe Rule 4003-1 of the Un	cial Form 106C (Schedule 'C') to climmediately preceding the date of tays, but your domicile was located in portion of such 180-day period that ited States Bankruptcy Court for the forms/bankruptcy-forms.	he filing of the petition North Carolina for in any other place.	n, or (2) your 180 days For more
Charity Ann Montgomery the	undersigned Debtor, h	ereby claim the following property a	as exempt pursuant to	11 II S C 8
		n Carolina, and non-bankruptcy fede		11 O.S.C. §
Total net value no owned by Debtor deceased.) Description of	ion amount below: but to exceed \$35,000. but to exceed \$60,000. (as tenant by the entire	(Debtor is unmarried, 65 years of ageties or joint tenant with rights of su	rvivorship, and forme Amt. Mtg.	r co-owner is
Property & Address 164 Lamore Court Winston Salem, NC 27107 Davidson County	Value	Holder(s)	or Lien	Value
Value Determined by County Tax Records		Flagstar Bank, FSB	170,407.90	
Joint	229,210.00	Flagstar Bank, FSB	39,457.65	19,344.45
` ,	ıl Net Value		\$	19,344.45
	et Exemption	ion, not to exceed \$5,000.	\$ \$	30,000.00 5,000.00
(This ar an exen	nount, if any, may be	carried forward and used to claim owned by the Debtor. (NCGS	Ψ	3,000.00
		ring property is claimed as exempt pg to property held as tenants by the		§ 522(b)(3)(B) and
Description of Property & Address -NONE-	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
3. MOTOR VEHICLE. (NO exempt not to exceed \$3,5		Only one vehicle allowed under this	paragraph with net va	lue claimed as
Year, Make	Market	Lion Holdon(s)	And The	Net
Model of Auto	Value	Lien Holder(s)	Amt. Lien	Value

91C (4/21) Year, Make Model of Auto 2017 Toyota Tundra 40,000 miles VIN #: 5TFRM5F11HX122068 Includes: 4.6L V8 Engine Value Determined by 90% of NADA Clean Retail Value	Market Value	Lien Holder	(s)		Amt. Lien	Net Value
Joint	27,337.50	Ally Bank			16,115.00	11,222.50
(a) Statutory allowance			\$	3,500		
(b) Amount from 1(b) above to be u (A part or all of 1(b) may be use	1 0 1	n.	\$	2,111.25		
	Total N	let Exemption	\$	5,611.25		

4. **TOOLS OF TRADE, IMPLEMENTS, OR PROFESSIONAL BOOKS.** (NCGS 1C-1601(a)(5). Used by Debtor or Debtor's dependent. Total net value of all items claimed as exempt not to exceed \$2,000.)

Description Valu	T . TT	(s)	A	mt. Lien	Net Value
(a) Statutory allowance		\$	2,000		
(b) Amount from 1(b) above to be used in this parag (A part or all of 1(b) may be used as needed.)	raph.	\$			
Tota	al Net Exemption	\$	0.00		

5. **PERSONAL PROPERTY USED FOR HOUSEHOLD OR PERSONAL PURPOSES NEEDED BY DEBTOR OR DEBTOR'S DEPENDENTS.** (NCGS 1C-1601(a)(4). Debtor's aggregate interest, not to exceed \$5,000 in value for the Debtor plus \$1,000 for each dependent of the Debtor, not to exceed \$4,000 total for dependents.)

Description of Property	Market Value	Lien Holder(s)	Amt. Lien	Net Value
Debtor 2's Wearing Apparel & Clothing Value Determined by Used Replacement Cost Debtor 2	750.00			750.00
Household Goods & Furnishings: Three Twin Beds and Mattresses, Coffee Table Value Determined by Used Replacement Cost Joint	3,500.00	Badcock Home Furniture & More	3,712.65	0.00
Household Goods & Furnishings: Mattress Value Determined by Used Replacement Cost Joint	150.00	Vive	2,292.43	0.00
Household Goods & Furnishings: Living room, dining room, kitchen, bedrooms and any other miscellaneous household goods and furnishings Value Determined by Used				
Replacement Cost Joint	1,200.00			1,200.00

91C (4/21)				
	ription	Market	T' TIL ()	A 4 T *	Net
	operty	Value	Lien Holder(s)	Amt. Lien	Value
	sehold Goods and ishings: Stove,				
	washer, Refrigerator				
	e Determined by Used				
Repla Joint	acement Cost	500.00	Conn's, Inc.	2,082.88	0.00
	ellaneous sports and				
	y equipment				
	e Determined by Debtor's				
Joint	Estimate	50.00			50.00
	visions, radios,				
com	outers, DVD player and				
	s, tablets, phones, game oles and other				
	ellaneous electronics				
Value	e Determined by Used				
-	acement Cost	500.00			500.00
Joint Wed	ding Jewelry				300.00
	e Determined by Used				
Repla	acement Cost	200.00			200.00
Debt	or 2	300.00			300.00
				Total Net Value	2,800.00
					•
	tatutory allowance for Debtor		. \$	5,000	
	statutory allowance for Debtor		ependents at	4,000.00	
	00 each (not to exceed \$4,000 amount from 1(b) above to be			4,000.00	
	A part or all of 1(b) may be us		1.		
`	ripart of all of 1(b) may be as	sea as necaca.)			
				Total Net Exemption	1,925.00
6.	LIFE INSURANCE (NC	GS 1C-1601(a)(6) and	d Article X Section 5 of N	North Carolina Constitution.)	
0.					
	Name of Insurance Compar-NONE-		of insured/Policy Date/Na.	me of beneficiary	
7.	PROFESSIONALLY PR	ESCRIBED HEALT	TH AIDS (FOR DEBTO	R OR DEBTOR'S DEPEND	ENTS).
	(NCGS 1C-1601(a)(7). No		(_		
	.				
	Description: -NONE-				
	HORE				
8.	DEBTOR'S RIGHT TO amount.)	RECEIVE FOLLOV	VING COMPENSATIO	N: (NCGS 1C-1601(a)(8). No	limit on number or
		ompensation for perso muities.	nal injury, including com	pensation from private disabili	ty policies or
			n of person of whom Debt	or was dependent for support.	
9.	TREATED IN THE SAM	IE MANNER AS AN GS 1C-1601(a)(9). No	INDIVIDUAL RETIRI	RNAL REVENUE CODE AN EMENT PLAN UNDER TH Lint.) AND OTHER RETIRE	E INTERNAL
	_				Volvo
	Detailed Description 403(b): Plan Administrato	r: Princinal			Value 1,171.00
	Employer: Hospice of Sur				1,171.00
	Value Determined by Deb *ERISA Qualified*		tatement		

100% of Fair Market Value Exempted Debtor 2

10. COLLEGE SAVINGS PLANS QUALIFIED UNDER SECTION 529 OF THE INTERNAL REVENUE CODE.

(NCGS 1C-1601(a)(10). Total net value not to exceed \$25,000 and may not include any funds placed in a college savings plan within the preceding 12 months, except to the extent any of the contributions were made in the ordinary course of Debtor's financial affairs and were consistent with Debtor's past pattern of contributions. This exemption applies only to the extent that the funds are for a child of Debtor and will actually be used for the child's college or university expenses.)

Detailed Description Value -NONE-

11. RETIREMENT BENEFITS UNDER A RETIREMENT PLAN OF OTHER STATE AND GOVERNMENTAL UNITS OF OTHER STATES, TO THE EXTENT THOSE BENEFITS ARE EXEMPT UNDER THE LAWS OF THAT STATE OR GOVERNMENTAL UNIT. (NCGS 1C-1601(a)(11). No limit on amount.)

Description: -NONE-

12. **ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH DEBTOR IS ENTITLED**. (NCGS 1C-1601(a)(12). No limit on amount to the extent such payments are reasonably necessary for the support of Debtor or a dependent of Debtor.)

Description: -NONE-

13. ANY OTHER REAL OR PERSONAL PROPERTY WHICH DEBTOR DESIRES TO CLAIM AS EXEMPT THAT HAS NOT PREVIOUSLY BEEN CLAIMED ABOVE. (NCGS 1C-1601(a)(2). The amount claimed may not exceed the remaining amount available under paragraph 1(b) which has not been used for other exemptions.)

	Market			Net	Value Claimed as
Description 2017 Toyota Tundra 40,000 miles VIN #: 5TFRM5F11HX122068 Includes: 4.6L V8 Engine Value Determined by 90% of NADA Clean Retail Value	Value	Lien Holder(s)	Amt. Lien	Value	Exempt
Joint	27,337.50	Ally Bank	16,115.00	11,222.50	2,111.25
2019 Toyota Sienna 90,000 miles VIN #: 5TDXZ3DC2KS999196 Includes: Rear Parking Sensors, Power Sunroof Value Determined by 90% of NADA Clean Retail Value					
Joint	30,667.50	PenFed Credit Union	45,032.37	0.00	0.00
2022 Kia Sportage 20,000 miles VIN #: KNDPM3AC2N7995389 Includes: N/A Value Determined by 90% of NADA Clean Retail Value		Wells Fargo Bank,			
Joint	27,360.00	National Association	19,204.00	8,156.00	2,675.98

	Market			Net	Value Claimed as
Description	Value	Lien Holder(s)	Amt. Lien	Value	Exempt
Cash on Hand					
Value Determined by Actual Cash Value					
Joint	50.00			50.00	25.00
Cats					
Value Determined by					
Debtor's Best Estimate Joint	50.00			50.00	25.00
Checking: **EMPTY**					
Checking Account #4					
Name of Bank: USAA					
Last Four of Account #:					
2786 Joint and Non-Filing				0.00	
Person	0.00			66% owned	0.00
Checking: Checking					
Account #3					
Name of Bank: USAA					
Last Four of Account #: 2404					
Joint and Non-Filing					
Person (Debtor 1's				0.66	
Parents)	1.00			66% owned	0.33
Checking: Checking					
Account #1 Name of Bank: USAA					
Last Four of Account #:					
4852					
Joint	36.20			36.20	18.10
Checking: Checking Account #2					
Name of Bank: USAA					
Last Four of Account #:					
7193					
Joint and Non-Filing				231.34	
Person (Debtor 1's Cousin)	350.51			66% owned	116.84
Dogs					
Value Determined by					
Debtor's Best Estimate	E0.00			E0 00	25.00
Joint	50.00			50.00	25.00
Savings: Savings Account #1					
Name of Bank: PenFed					
Credit Union					
Last Four of Account #:					
4012 Joint	5.00			5.00	2.50
(a) Total Net Value of property	y claimed in par	agraph 13.	\$	8,5	79.20
(b) Total amount available from	m paragraph 1 <i>(</i> h).	\$	5.0	00.00
(c) Less amounts from paragra				-,-	
1 8	Paragra		2,111.25		
	Paragra	ph 4(b) \$			
	Paragra				
		Net Balance Available from	om paragraph 1(b) \$ _ tal Net Exemption \$		88.75 88.75
		To	tal Nat Lyamption	28	xx /5

14. OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA

-NONE-

	TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT	\$ 0.00
15.	EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDERAL LAW:	
	-NONE- TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT	\$ 0.00

16. RECENT PURCHASES

The exemptions provided in NCGS 1C-1601(a)(2), (3), (4), and (5) are inapplicable with respect to tangible personal property purchased by the Debtor less than 90 days preceding the initiation of judgment collection proceedings or the filing of a petition for bankruptcy, unless the purchase of the property is directly traceable to the liquidation or conversion of property that may be exempt and no additional property was transferred into or used to acquire the replacement property.

List tangible personal property purchased by the Debtor less than 90 days preceding the filing of the bankruptcy petition:

Description -NONE-	Market Value	Lien Holder(s)	Amt. Lien	Net Value
DATE September 13, 2022		/s/ Charity Ann Mon	tgomery	
		Charity Ann Montgo	omery	
		Joint Debtor		

Case 22-50527 Filed 09/13/22 Page 30 of 82

		0 000 00000 00/_	5,	0.00	9/13/22 12:38P
Fill in this inform	ation to identify you	ır case:			
Debtor 1	Aric Richard Mo	ontgomery Middle Name Last Name		-	
Debtor 2 (Spouse if, filing)	Charity Ann Mo	Intgomery Middle Name Last Name		-	
United States Ban	kruptcy Court for the	MIDDLE DISTRICT OF NORTH CAROLINA		_	
Case number				_	if this is an
Official Form		s Who Have Claims Secure	d hy Propert		12/15
Be as complete and	accurate as possible.	If two married people are filing together, both are ecout, number the entries, and attach it to this form. O	qually responsible for s	upplying correct informa	tion. If more space
` ,	nave claims secured b	v vour property?			
`		his form to the court with your other schedules. Y	ou have nothing else	to report on this form.	
_	all of the information	•			
		below.			
	Secured Claims		Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Ally Bank		Describe the property that secures the claim:	\$16,115.00	\$27,337.50	\$0.00
Creditor's Name		2017 Toyota Tundra 40,000 miles VIN #: 5TFRM5F11HX122068 Includes: 4.6L V8 Engine Value Determined by 90% of NADA Clean Retail Value			
Drive, Suit Sandy, UT		As of the date you file, the claim is: Check all that apply. Contingent			
	City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or se car loan)	cured		
■ Debtor 1 and Del	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla			Money Security		

 $\hfill\square$ Check if this claim relates to a community debt

Date debt was incurred 10/2017

Last 4 digits of account number

7124

Deb	otor 1 Aric Richard Montgome	ery	Case number (if known)		
	First Name Middle N		_		
Deb	otor 2 Charity Ann Montgome				
	First Name Middle N	lame Last Name			
2.2	Badcock Home Furniture & More	Describe the property that secures the claim:	\$3,712.65	\$3,500.00	\$0.00
	Attn: Officer 1409 10th Street Lake Park, FL 33403 Number, Street, City, State & Zip Code	Household Goods & Furnishings: Three Twin Beds and Mattresses, Coffee Table Value Determined by Used Replacement Cost Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	At least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset) Non-Purc	hase Money Security		
Date	e debt was incurred 01/2022	Last 4 digits of account number 9528			
2.3		Describe the property that secures the claim:	\$2,082.88	\$500.00	\$1,582.88
	Attn: Officer 2445 Technology Forest	Household Goods and Furnishings: Stove, Dishwasher, Refrigerator Value Determined by Used Replacement Cost Joint			
	Blvd., Suite 800 The Woodlands, TX 77381	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	At least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt		Money Security		
Date	e debt was incurred 09/2020	Last 4 digits of account number 3130			

Debtor 1 Aric Richard Montgome		Case number (if known)		
First Name Middle N				
Debtor 2 Charity Ann Montgome	•			
First Name Middle N	ame Last Name			
2.4 Flagstar Bank, FSB	Describe the property that secures the claim:	\$170,407.90	\$229,210.00	\$0.00
Creditor's Name	164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records			
Attn: Officer	Joint			
5151 Corporate Drive Troy, MI 48098	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Number, Street, Oity, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgage	e (PRINCIPAL)		
Date debt was incurred	Last 4 digits of account number 2003	3		
Date debt was incurred 2.5 Flagstar Bank, FSB	Last 4 digits of account number 200: Describe the property that secures the claim:	3 \$39,457.65	\$229,210.00	\$0.00
	<u> </u>		\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint		\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply.		\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent		\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	\$39,457.65	\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$39,457.65	\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or	\$39,457.65	\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or car loan)	\$39,457.65	\$229,210.00	\$0.00
2.5 Flagstar Bank, FSB Creditor's Name Attn: Officer 5151 Corporate Drive Troy, MI 48098 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: 164 Lamore Court Winston Salem, NC 27107 Davidson County Value Determined by County Tax Records Joint As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien)	\$39,457.65	\$229,210.00	\$0.00

Debtor 1 Aric Richard Montgome	ery	Case number (if known)		
First Name Middle N	ame Last Name			
Debtor 2 Charity Ann Montgome	ry			
First Name Middle N	ame Last Name			
2.6 PenFed Credit Union	Describe the property that secures the claim:	\$45,032.37	\$30,667.50	\$14,364.87
Creditor's Name Attn: Officer	2019 Toyota Sienna 90,000 miles VIN #: 5TDXZ3DC2KS999196 Includes: Rear Parking Sensors, Power Sunroof Value Determined by 90% of NADA Clean Retail Value Joint			
7940 Jones Branch Drive Mc Lean, VA 22102	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
11/2021				
(Refinanced Date debt was incurred)	Last 4 digits of account number 396	9		
Date dept was incurred	Last 4 digits of account number	<u></u>		
2.7 Vive	Describe the property that secures the claim:	\$2,292.43	\$150.00	\$2,142.43
Creditor's Name Attn: Officer	Household Goods & Furnishings: Mattress Value Determined by Used Replacement Cost Joint			
3605 Glenwood Avenue Suite 500	As of the date you file, the claim is: Check all that	J		
Raleigh, NC 27612	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Non-Pur	chase Money Security		
Date debt was incurred 09/2021	Last 4 digits of account number 411	0		

Debtor	1 Aric Richard Montgome	ery	Case number (if known)		
	First Name Middle N	lame Last Name			
Debtor	Charity Ann Montgome	ry			
	First Name Middle N	lame Last Name			
	Vells Fargo Bank, lational Association	Describe the property that secures the clai	im: \$19,204.00	\$27,360.00	\$0.00
<i>A</i> 1	Attn: Officer 01 N. Phillips Avenue Sioux Falls, SD 57104	2022 Kia Sportage 20,000 miles VIN #: KNDPM3AC2N7995389 Includes: N/A Value Determined by 90% of NAD Clean Retail Value Joint As of the date you file, the claim is: Check a apply. ☐ Contingent			
N	lumber, Street, City, State & Zip Code	☐ Unliquidated			
Who o	wes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	tor 1 only tor 2 only	☐ An agreement you made (such as mortgag car loan)	ge or secured		
■ Deb	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)		
_	east one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a mmunity debt	Other (including a right to offset)	hase Money Security		
Date de	ebt was incurred 11/2021	Last 4 digits of account number	4517		
	•	Column A on this page. Write that number her	re: \$298,304.8	8	
	s is the last page of your form, add that number here:	the dollar value totals from all pages.	\$298,304.8	8	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case	22-5052	27 DOC	1 Filed (19/13/22	Page 35 0	1 82		9/1	3/22 12:38PM
Fill	in this inform	nation to identify your o	case:								
Deb	otor 1	Aric Richard Mon	taomerv								
		First Name	Middle	Name	Last N	ame					
Deb	otor 2	Charity Ann Mont	gomery								
(Spo	use if, filing)	First Name	Middle	Name	Last N	ame					
Unit	ed States Bar	nkruptcy Court for the:	MIDDLE D	DISTRICT OF	NORTH CAR	DLINA					
Cas (if kn	se number									if this is a	n
Scl Be as	s complete and	/F: Creditors W l accurate as possible. Us racts or unexpired leases	e Part 1 for c that could re	reditors with	PRIORITY claims	and Part 2 fo	s on Schedule A/B:	Property (Of	fficial For	m 106A/B)	er party to and on
Sche left. A name	dule D: Credito Attach the Conte	tory Contracts and Unexpiors Who Have Claims Sectionation Page to this pagner (if known). I of Your PRIORITY Universelves	ured by Prope e. If you have	erty. If more se e no informati	space is needed,	copy the Part	you need, fill it out,	number the	entries in	n the boxe	s on the
		rs have priority unsecured									
	No. Go to Pa		a ciaiiiis agai	iiist you:							
		art Z.									
	Yes.		16 11:								
	identify what typ possible, list the	priority unsecured claims be of claim it is. If a claim hat c claims in alphabetical orde han one creditor holds a par	s both priority r according to	and nonpriority and creditor's	ty amounts, list the name. If you have	at claim here a	nd show both priority	and nonprior	ity amount	ts. As much	n as
	(For an explana	tion of each type of claim, s	ee the instruc	ctions for this fo	orm in the instruct	on booklet.)					
		,				,	Total claim	Priority amount		Nonprior amount	rity
2.1	Davidso	on County Tax Collec	ctor	Last 4 digits	of account numb	er	\$0.00		\$0.00	amount	\$0.00
	Priority Cre Attn: Of	editor's Name ficer or Managing Ag ensboro St.		_	e debt incurred?				Y		,
		on, NC 27292		A		! ! O! !					
		reet City State Zip Code I the debt? Check one.			you file, the cla	ım is: Check a	ii that appiy				
	_			☐ Contingent							
	Debtor 1 o	•		Unliquidate	ed						
	Debtor 2 o	nly		☐ Disputed							
	Debtor 1 a	nd Debtor 2 only			RITY unsecured						
	☐ At least on	e of the debtors and anothe	r	☐ Domestic s	support obligations	3					
	☐ Check if the	his claim is for a commun	ity debt	Taxes and	certain other deb	ts you owe the	government				
	Is the claim s	ubject to offset?		☐ Claims for	death or personal	injury while yo	u were intoxicated				
	No			☐ Other. Spe							
	☐ Yes			·	Taxes O	wed (Notic	e Only)				

Case 22-50527 Doc 1 Filed 09/13/22 Page 36 of 82

9/13/22 12:38PM

Debtor 2 Charity Ann Montgomery	Case nur	mber (if known)		
2.2 Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
Priority Creditor's Name Attn: Centralized Insolvency Operation P.O. Box 7346	When was the debt incurred?			·
Philadelphia, PA 19101-7346				
Number Street City State Zip Code	As of the date you file, the claim is: Check all t	that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
☐ Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
\square At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts you owe the go □ Claims for death or personal injury while you			
No	Other. Specify			
Yes	Taxes Owed (Notice	Only)		
2.3 NC Department of Revenue	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
Priority Creditor's Name Attn: Bankruptcy Dept. Post Office Box 25000 Raleigh. NC 27640	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim is: Check all t	that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the go	overnment		
Is the claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated		
■ No	☐ Other. Specify			
Yes	Taxes Owed (Notice	Only)		
2.4 United States Attorney's Office Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
Middle District of North Carolina 101 S. Edgeworth Street - 4th Floor	When was the debt incurred?			
Greensboro, NC 27401				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all t	that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
<u> </u>	Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim: ☐ Domestic support obligations			
At least one of the debtors and another	•			
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts you owe the go ☐ Claims for death or personal injury while you			
No		were intoxicated		
☐ Yes	☐ Other. Specify Taxes Owed (Notice	Only)		
⊔ Yes	Taxes Owed (Notice	Only)		

 \square No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Case 22-50527 Doc 1 Filed 09/13/22 Page 37 of 82

	Aric Richard Montgomery Charity Ann Montgomery	Case number (if known)	9/13/22 12:3011
4. Lis	secured claim, list the creditor separately for each cla	alphabetical order of the creditor who holds each claim. If a creditor has more tha im. For each claim listed, identify what type of claim it is. Do not list claims already increditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
ı a			Total claim
4.1	10 Cycles, LLC Nonpriority Creditor's Name Attn: Officer	Last 4 digits of account number 3435 When was the debt incurred?	\$7,200.00
	10501 Monroe Road Matthews, NC 28105 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	-
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Vehicle Purchase	-
4.2	Ally Lending Nonpriority Creditor's Name Attn: Officer PO BOx 9212 Old Bethpage, NY 11804 Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number 9948 When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$4,956.62
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan (Multiple)	_

Case 22-50527 Doc 1 Filed 09/13/22 Page 38 of 82

	or 2 Charity Ann Montgomery	Case number (if known)	
4.3	Apple Card	Last 4 digits of account number 3435	\$703.00
	Nonpriority Creditor's Name Attn: Officer PO Box 7247	When was the debt incurred?	
	Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.4	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number 2133	\$5,028.82
	Attn: Officer PO Box 110564	When was the debt incurred?	
	Durham, NC 27709 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card (Judgment)	
4.5	Boost Credit Line	Last 4 digits of account number 6326	\$1,410.00
	Nonpriority Creditor's Name Attn: Officer 125 Mission Ranch Blvd.	When was the debt incurred?	
	Chico, CA 95926		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	⊔ Yes	■ Other. Specify Payday Loan	

Case 22-50527 Doc 1 Filed 09/13/22 Page 39 of 82

	r 1 Aric Richard Montgomery r 2 Charity Ann Montgomery	Case number (if known)	
4.6	Capital One	Last 4 digits of account number 4343	\$1,645.23
	Nonpriority Creditor's Name Attn: Officer PO Box 71083	When was the debt incurred?	
	Charlotte, NC 28272 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card (Multiple)	
4.7	Credit First	Last 4 digits of account number 0626	\$1,010.00
	Nonpriority Creditor's Name Attn: Officer PO Box 81344	When was the debt incurred?	
	Cleveland, OH 44188 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.8	Credit One	Last 4 digits of account number 7966	\$4,130.63
	Nonpriority Creditor's Name Attn: Officer	When was the debt incurred?	
	PO Box 60500 City of Industry, CA 91716		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card (Multiple)	

Case 22-50527 Doc 1 Filed 09/13/22 Page 40 of 82

	1 Aric Richard Montgomery 2 Charity Ann Montgomery	Case number (if known)	
4.9	Cross River Bank Nonpriority Creditor's Name Attn: Officer	Last 4 digits of account number 5715 When was the debt incurred?	\$10,572.00
	885 Teaneck Road Teaneck, NJ 07666 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.1	Discover	Last 4 digits of account number 2121	\$996.00
0	Nonpriority Creditor's Name	Last 4 digits of account number 2121	Ψ330.00
	Attn: Officer PO Box 71242 Charlotte. NC 28272	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.1	Eloan Wearhouse	Last 4 digits of account number 4305	\$1,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Attn: Officer PO Box 1753	when was the debt incurred?	
	Hayward, WI 54843		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan	

	or 2 Charity Ann Montgomery Case number (if known)		
4.1	Equifax, Inc	Last 4 digits of account number	\$0.00
2	Nonpriority Creditor's Name Attn: Bankruptcy Notification P.O. Box 740241	When was the debt incurred?	Ψ0.33
	Atlanta, GA 30374 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Bureau (Notice Only)	
4.1	Experian	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Notification PO Box 9701	When was the debt incurred?	
	Allen, TX 75013 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Bureau (Notice Only)	
4.1	Finewise Bank Nonpriority Creditor's Name	Last 4 digits of account number 0193	\$9,100.00
	Attn: Officer 756 E. Winchester Street, Suite 100 Salt Lake City, UT 84107	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan	

Case 22-50527 Doc 1 Filed 09/13/22 Page 42 of 82

Kevin Powell Motorsports	Last 4 digits of account number	\$3,607.12
Nonpriority Creditor's Name	When was the debt incurred?	
Attn: Officer	when was the dept incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only		
_	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	_ ****	
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Vehicle Purchase	
Klarna	Last 4 digits of account number 1447	\$480.93
Nonpriority Creditor's Name		
Attn: Officer PO Box 206487	When was the debt incurred?	
РО Вох 206467 Dallas, TX 75320		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Personal Loan	
_ 100	— Other. Specify	
Kohl's	Last 4 digits of account number 7003	\$1,607.00
Nonpriority Creditor's Name Attn: Officer	When was the debt incurred?	
PO Box 60043		
Charlotte, NC 28201	As of the date you file the claim in Ol. 1. II.I.	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ Occidences	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
Deptor 1 and Deptor 2 only At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the deptors and another ☐ Check if this claim is for a community	Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	

Case 22-50527 Doc 1 Filed 09/13/22 Page 43 of 82

	71 Aric Richard Montgomery 72 Charity Ann Montgomery	Case number (if known)		
4.1 8	Milestone/GPS	Last 4 digits of account number 0861	\$507.36	
	Nonpriority Creditor's Name Attn: Officer P.O. Box 4499 Beaverton, OR 97076	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	_	`		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	■ No □ Yes	■ Other. Specify Credit Card		
4.1 9	Mohela / Dept. of Education	Last 4 digits of account number 6326	\$38,367.00	
	Nonpriority Creditor's Name Attn: Officer 633 Spirit Drive	When was the debt incurred?		
	Chesterfield, MO 63005 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	☐ Other. Specify		
		Student Loan		
4.2	OneMain Financial Group, LLC	Last 4 digits of account number 1979	\$8,891.00	
	Nonpriority Creditor's Name Attn: Officer 160 Mine Lake Ct. Ste. 200 Raleigh, NC 27615	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Personal Loan		

Case 22-50527 Doc 1 Filed 09/13/22 Page 44 of 82

	or 1 Aric Richard Montgomery Charity Ann Montgomery	Case number (if known)		
4.2 1	OPP Loans	Last 4 digits of account number 2107	\$2,333.00	
	Nonpriority Creditor's Name Attn: Officer 130 E Randolph Street, Suite 3400	When was the debt incurred?		
	Chicago, IL 60601 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Personal Loan		
4.2 2	Regional Finance	Last 4 digits of account number 9110	\$9,029.00	
	Nonpriority Creditor's Name Attn: Officer 5062 Peters Creek Parkway Winston Salem, NC 27127	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Personal Loan (Multiple)		
4.2	Rosebud Lending LZO Zocaloans Nonpriority Creditor's Name	Last 4 digits of account number 3435	\$1,000.00	
	Attn: Officer PO BOx 1147 Mission, SD 57555	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Personal Loan		

Debtor 1 Aric Richard Montgomery Debtor 2 Charity Ann Montgomery Case number (if known)		Case number (if known)	
4.2	Royalty	Last 4 digits of account number 6441	\$1,711.64
4	Nonpriority Creditor's Name Attn: Officer 1411 Plaza West Road	When was the debt incurred?	Ψ1,111.04
	Winston Salem, NC 27103 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.2 5	Spotloan	Last 4 digits of account number 7285	\$3,668.55
	Nonpriority Creditor's Name Attn: Officer PO Box 720	When was the debt incurred?	
	Belcourt, ND 58316 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan (Multiple)	
4.2 6	SRS Motorsports, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 3435	\$2,701.67
	Attn: Officer 3112 Sands Dr. Greensboro, NC 27405	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Vehicle Purchase	

Case 22-50527 Doc 1 Filed 09/13/22 Page 46 of 82

Synchrony Care Credit	Last 4 digits of account number 5616	\$726.8
Nonpriority Creditor's Name Attn: Officer	When was the debt incurred?	
PO Box 960061	Then was the dest mounted.	
Orlando, FL 32896	_	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	
Synchrony Google Finance	Last 4 digits of account number 1808	\$42.62
Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
Attn: Officer	When was the debt incurred?	
PO Box 960061 Orlando, FL 32896		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Transportation Alliance Bank	Last 4 digits of account number 1790	\$357.99
Nonpriority Creditor's Name		
Attn: Officer	When was the debt incurred?	
4185 Harrison Blvd. Ogden, UT 84403		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Personal Loan	

	or 1 Aric Richard Montgomery Or 2 Charity Ann Montgomery	Case number (if known)		
4.3 0	TransUnion	Last 4 digits of account number	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Notification P.O. Box 1000 Crum Lynne, PA 19022	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Bureau (Notice Only)		
4.3 1	Upgrade Nonpriority Creditor's Name	Last 4 digits of account number	\$980.79	
	Attn: Officer 2 N Central Avenue, 10th Floor	When was the debt incurred?		
	Phoenix, AZ 85004 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card		
4.3	Verizon Nonpriority Creditor's Name	Last 4 digits of account number	\$3,481.35	
	Attn: Officer PO Box 489 Newark, NJ 07101	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset? ■	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Utility Bill		

	Aric Richard Montgomery Charity Ann Montgomery		Case number (if known)	
4.3	Wake Forest Ambulatory Ventures	Last 4 digits of account numbe	r 5281	\$3,185.00
I	Nonpriority Creditor's Name Attn: Officer PO Box 110564	When was the debt incurred?		
1	Durham, NC 27709 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply	
l	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
ı	Debtor 1 and Debtor 2 only	☐ Disputed		
ı	\square At least one of the debtors and another	Type of NONPRIORITY unsecur	red claim:	
	☐ Check if this claim is for a community	Student loans		
	debt s the claim subject to offset?	Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not	
	No		ring plans, and other similar debts	
	■ No □ Yes	Other. Specify Medical B		
	- 103	Other. Specify	···	-
	Wake Forest Baptist Health	Last 4 digits of account numbe	r 6099	\$761.39
	Nonpriority Creditor's Name Attn: Officer	When was the debt incurred?		
Í	1 Medical Center Boulevard Winston Salem, NC 27157			-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply	
	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
l	At least one of the debtors and another	Type of NONPRIORITY unsecui	red claim:	
	Check if this claim is for a community	Student loans		
I	debt s the claim subject to offset? —	report as priority claims	paration agreement or divorce that you did not	
	No	·	ring plans, and other similar debts	
	Yes	Other. Specify Medical B	ill	-
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed		
is trying have m	g to collect from you for a debt you owe to s	someone else, list the original creditor at you listed in Parts 1 or 2, list the ad	t you already listed in Parts 1 or 2. For examp in Parts 1 or 2, then list the collection agenc ditional creditors here. If you do not have ad	y here. Similarly, if you
Name and	d Address errick Garland	On which entry in Part 1 or Part 2 did you Line 2.2 of (<i>Check one</i>):		
	ey General of the U.S.		Part 1: Creditors with Priority Unsecured Cla	
US Dep 950 Per	partment of Justice nnsylvania Avenue NW agton, DC 20530-0001		☐ Part 2: Creditors with Nonpriority Unsecured	Claims
Wasiiii	.9.0.1, 20 2000 0001	Last 4 digits of account number		
Name and	d Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	Smithfield LLC		☐ Part 1: Creditors with Priority Unsecured Cla	
Attn: O	tticer (660702		Part 2: Creditors with Nonpriority Unsecured	Claims
	TX 75266			
		Last 4 digits of account number	9948	
Name and		On which entry in Part 1 or Part 2 did yo	_	
InDebte			Part 1: Creditors with Priority Unsecured Cla	
Attn: O	micei		■ Part 2: Creditors with Nonpriority Unsecured	Claims

Debtor 1 Aric Richard Montgomery Debtor 2 Charity Ann Montgomery		Case number (if known)
PO BOx 1201 Farmington, MO 63640	Last 4 digits of account number	5715
Name and Address	On which entry in Part 1 or Part 2 di	
MNET Financial	Line 4.33 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Attn: Officer 95 Argonaut St. Suite 200 Aliso Viejo, CA 92656		■ Part 2: Creditors with Nonpriority Unsecured Claims
Aliso Viejo, CA 92000	Last 4 digits of account number	6326
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?
Sessoms and Rogers PA	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Officer PO Box 110564 Durham, NC 27709		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	3435

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 38,367.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 92,825.52
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 131,192.52

Case 22-50527 Doc 1 Filed 09/13/22 Page 50 of 82

9/13/22 12:38PM

Fill in this infor	mation to identify your	case:		
Debtor 1	Aric Richard Mon	tgomery		
	First Name	Middle Name	Last Name	
Debtor 2	Charity Ann Mont	gomery		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA	
Case number				_ 0, , , , , , ,
(if known)				☐ Check if this is ar amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ļ	Person or	company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIP Code	
2.5	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4			<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		Otale	ZII COUE	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Case 22-50527 Doc 1 Filed 09/13/22 Page 51 of 82

First Name Middle Name Last Name Debtor 2 (Spouse if, filling) First Name Middle Name Last Name United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA Case number (if known) Check if this is an amended filling Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page ill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write					_	9/13/22 12:38P
Debtor 2 (Spouse it, Bleg) Charity Ann Montgomery Free Name Charity Ann Montgomery Free Name Charity Ann Montgomery Free Name United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA Case number (if known) Check if this is an amended filing Difficial Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married lill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write our name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Go to line 3. Yes, Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person she in line 2 sgain as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (officiant form 106D). Schedule Eif (Official Form 106E/P), or Schedule G (Official Form 106G). Use Schedule D, Schedule Eif, or Schedule D (Check all schedules that apply: Name Name Schedule O, line	Fill in this	s information to identify you	ır case:			
Debtor 2 Charity Ann Montgomery First Name	Debtor 1	Aric Pichard Me	ontgomory			
United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA Case number Check if this is an amended filing	Deptor 1			Last Name		
Check if this is an amended filing	Debtor 2	Charity Ann Mo	ontgomery			
Case number Check if this is an armended filing Check if this mati	(Spouse if, fil			Last Name		
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married eople are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pagin it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write our name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person she in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Office Form 106D). Schedule E/F, Official Form 106E/F), or Schedule G (Official Form 106E). Use Schedule D, Schedule E/F, in Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G	United Sta	ates Bankruptcy Court for the	: MIDDLE DISTRICT OF	NORTH CAROLINA		
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married eople are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pagin it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write our name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person she in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Office Form 106D). Schedule E/F, Official Form 106E/F), or Schedule G (Official Form 106E). Use Schedule D, Schedule E/F, in Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G	Case num	nber				
Difficial Form 106H Schedule H: Your Codebtors 12/15 Schedule EF (Official Form 106E)F), or Schedule G (Official Form 106G). Use Schedule D, Schedule EF, ince 13.1 12/15 Schedule D, line 13.2 13.1 13.1 14.1 15.2 15.2 15.2 16.2 16.3 16.3 16.3 16.3 16.3 16.3 16.3 16.3 16.3 16.3 17.4 18.3 18.4 18.						☐ Check if this is an
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married seeple are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pagil It out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write our name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G). Schedule E/F, Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G (Column 2: The creditor to whom you owe the del Column 2: The creditor to whom you owe the del Check all schedules G, line Number Street						amended filing
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married seeple are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pagil It out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write our name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G). Schedule E/F, Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G (Column 2: The creditor to whom you owe the del Column 2: The creditor to whom you owe the del Check all schedules G, line Number Street	o	. =				
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married beople are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pagill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write four name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. 1. No 2 ves 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) 1. No. Go to line 3. 2 ves. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person she in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Office Form 106D). Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2: 1. Number Street	Officia	Il Form 106H				
people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Paging it it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write our name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officont Column 2). Column 1, Your codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officont Column 2). Column 2: The creditor to whom you owe the del Check all schedules E/F, or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, line Schedule G, line Sched	Sched	dule H: Your Co	debtors			12/15
people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Paging Itil tout, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write four name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person she in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officont Column 2). Column 1, Your codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officont Column 2). Column 2: The creditor to whom you owe the del Check all schedule E/F, Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Sch	_					
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ■ No. Go to line 3. No. Go to line 3. □ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Offic Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2. Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Column 2: The creditor to whom you owe the del Check all schedules that apply: 3.1 Number Street Number Street 3.2 Schedule D, line Name Schedule E/F, line Name Schedule E/F, line Schedule G, line Schedule G, line	our name	e and case number (if know	n). Answer every questio	n.		p of any Additional Pages, write
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ■ No. Go to line 3. No. Go to line 3. □ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Office Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G (official Form 106G). Use Schedule D, Schedule E/F, or Schedule G (Dumn 2: The creditor to whom you owe the del Check all schedules that apply: 3.1 Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Column 2: The creditor to whom you owe the del Check all schedules that apply: 3.1 Name Schedule D, line Schedule G, line Number Street Schedule D, line Schedule E/F, line Number Schedule G, line Schedule G, line	■ No					
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Offic Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2: The creditor to whom you owe the del Check all schedules that apply: Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Schedule D, line Schedule D, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Name Schedule G, line Schedule G, line Name Name Schedule G, line Name Name Schedule G, line Name Name Name Schedule G, line Name Name Name Name Name Schedule G, line Name N						
Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officern 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2: The creditor to whom you owe the del Check all schedules that apply: Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Schedule D, line Schedule B, line Schedule G, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedul						
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Offic Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2: The creditor to whom you owe the del Check all schedules that apply: Column 1: Your codebtor Column 2: The creditor to whom you owe the del Check all schedules that apply: 3.1						
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person sho in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Office Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2. Column 1: Your codebtor	■ No	. Go to line 3.				
in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officer Torm 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2. Column 1: Your codebtor	☐ Ye	s. Did your spouse, former sp	ouse, or legal equivalent liv	ve with you at the time?		
in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Officer Torm 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to out Column 2. Column 1: Your codebtor						
Name, Number, Street, City, State and ZIP Code Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	in line Form	e 2 again as a codebtor only 106D), Schedule E/F (Offic	y if that person is a guara	ntor or cosigner. Make s	sure you have listed t	he creditor on Schedule D (Official
Number Street City State ZIP Code Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line			ZIP Code			
Number Street City State ZIP Code Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line						
Number Street City State Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line	3.1	Name			_	· · · · · · · · · · · · · · · · · · ·
Number Street City State ZIP Code Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line		Name				
State ZIP Code					☐ Schedule G, III	ne
Schedule D, line			0	710.0		
Name Schedule E/F, line Schedule G, line Number Street		City	State	ZIP Code		
Name Schedule E/F, line Schedule G, line Number Street	3.2				☐ Schedule D. lir	ne
Number Street Street		Name			_	
		Number Street			_	
			State	ZIP Code		

Fill	in this information to identify your ca	ase:		
Del	otor 1 Aric Richard	Montgomery		
	otor 2 Charity Ann	Montgomery		
Uni	ted States Bankruptcy Court for the	MIDDLE DISTRICT O	F NORTH CAROLINA	
	se number 		-	Check if this is: An amended filing A supplement showing postpetition chapter
	fficial Form 106I			13 income as of the following date: MM / DD/ YYYY
S	chedule I: Your Inco	ome		12/15
sup spo atta	plying correct information. If you use. If you are separated and you	are married and not fili r spouse is not filing wi	ng jointly, and your spouse is livith you, do not include information	and Debtor 2), both are equally responsible for ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		☐ Employed	■ Employed
	attach a separate page with information about additional	Employment status	■ Not employed	☐ Not employed
	employers.	Occupation		Registered Nurse
	Include part-time, seasonal, or self-employed work.	Employer's name		Hospice of Surry County
	Occupation may include student or homemaker, if it applies.	Employer's address		1427 Edgewood Drive, Suite 101 Mount Airy, NC 27030

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

			non-	filing spouse
2.	\$	0.00	\$	6,199.73
3.	+\$	0.00	+\$_	0.00
4.	\$	0.00	\$_	6,199.73

For Debtor 1

9 months

For Debtor 2 or

5a. Tax, Medicare, and Social Security deductions 5a. \$ 0.00	Debto Debto		Charity Ann Montgomery	-	С	Case number (if kr	nown)				
See List all payroll deductions: See						For Debtor 1					
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Security Securi		Сор	y line 4 here	4.		\$	0.00				
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Security Securi	5.	List	all payroll deductions:								
5.5. Mandatory contributions for retirement plans 5.6. Voluntary contributions for retirement plans 5.7. Voluntary contributions for retirement plans 5.8. Insurance 5.9. \$ 0.00 \$ 224.46 5.0. Required repayments of retirement fund loans 5.9. \$ 0.00 \$ 524.66 5.9. Domestic support obligations 5.9. \$ 0.00 \$ 5.24.66 5.9. Domestic support obligations 5.9. Union dues 5.9. \$ 0.00 \$ 0.00 5.9. Union dues 5.9. Union dues 5.9. \$ 0.00 \$ 0.00 5.00	0.		• •	5a.		\$ (00	\$		803 1	2
5c. Voluntary contributions for retirement plans 5c. Required repayments of retirement fund loans 5d. S. 0.00 \$ 0.00 5e. Insurance 5e. S. 0.00 \$ 5.24.66 5f. Domestic support obligations 5f. S. 0.00 \$ 5.24.66 5f. Domestic support obligations 5f. S. 0.00 \$ 0.00 5f. Other deductions. Specify: 5g. Union dues			·								
56. Required repayments of retirement fund loans 56. Insurance 56. Se. Insurance 56. Domestic support obligations 56. Insurance 57. Domestic support obligations 58. Union dues 59. \$ 0.00 \$ 0.00 59. Union dues 59. \$ 0.00 \$ 0.00 50. Other deductions. Specify: 50. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 1,552.24 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 1,552.24 8. Net income regularly received: 8. Net income regularly received: 8. Net income rom rental property and from operating a business, profession, or farm Attach a statement for each property and from operating a fundamental monthly ret income. 8a. \$ 0.00 \$ 0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Unemployment compensation 8d. Scola Security 8d. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8pecity: 8g. 9n.000 \$ 0.00 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. Add all other incombe. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 7,701.92 \$ 13,768.5 Combined monthly income. 250.00 \$ 0.00			•			:		- :-			
55. Insurance 56. Insurance 57. Obmestic support obligations 57. Other deductions. Specify: 58. O.00 59. Union dues 59. \$ 0.00 50. Other deductions. Specify: 59. \$ 0.00 50. Other deductions. Add lines 5a+5b+5c+5d+5d+5g+5fh. 6. \$ 0.00 50. 0.00 50. O.00		5d.	·	5d.							
5g. Union dues 5g. Union dues 5g. \$ 0.00 \$ 0.00 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 1,552.24 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 4,647.49 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. S 0.00 \$ 550.00 8d. S 0.00 \$ 0.00 8e. \$ 1,097.70 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. \$ 1,097.70 \$ 0.00 8d. \$ 0.00 \$ 0.00 8d. \$ 0		5e.	Insurance	5e.		\$	0.00	\$		524.6	6
5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 1,552.24 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 4,647.49 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you neceive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 7,701.92 \$ 13,768.5 Combined monthly income. 11. **Signature of the summary of Schedules* and Statistical Summary of Certain Liabilities* and Related Data, if it applies* 12. **Combined monthly income.** 13. Do you expect an increase or decrease within the year after you file this form? 14. **Combined monthly income.** 15. **Combined monthly income.** 16. **Do you expect an increase or decrease within the year after you file this form?** 18. **Do you expect an increase or decrease within the year after you file this form?** 19. **Do you expect an increase or decrease within the year after you file this form?**		5f.	Domestic support obligations	5f.		\$	0.00	\$		0.0	0
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 1,552.24 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 4,647.49 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 550.00 8d. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8d. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8d. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. \$ 4,7701.92 = \$ 13,768.5 Combined Contributions from an unmarried partner, members of your household, your dependents, your roommates, and other frends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other frends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, me		5g.	Union dues	5g.		\$ (0.00	\$		0.0	0
8. List all other income regularly received: 8a. Net income regularly received: 8b. Interest and dividends		5h.	Other deductions. Specify:	_ 5h.	.+	\$	0.00	+ \$		0.0	0
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Increast and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 550.00 \$ 0.0	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$	0.00	\$	1	,552.2	24
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 6c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 550.00 8d. Unemployment compensation 8e. Social Security 8e. \$ 1,097.70 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 7,701.92 \$ 13,768.5 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$	0.00	\$	4	,647.4	<u>.9</u>
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?	8.		Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 550.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h. + 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. Add all other income. Add line 8 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?			•			·		_ `.			
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8e. \$ 1,097.70 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? 14. Combined monthly income. 15. Combined monthly income.				8b.		\$	0.00	_ \$		0.0	0
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h.+ \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.			regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			:		- : -			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 11. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.			• •					_			
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: VA Disability 8h. \$ 4,718.91 + \$ 2,254.43 Pro Rated Tax Refund 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.			•	8e.		\$1,097	7.70	_ \$		0.0	0
8h. Other monthly income. Specify: VA Disability Pro Rated Tax Refund 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No.		8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			·		\$			
Pro Rated Tax Refund 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.		-				·		_ *.			
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 6,066.61 \$ 3,054.43 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.		8h.		_ 8h.					2		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 13,768.5 Combined monthly income. No.			Pro Rated Tax Refund	_		\$ 250	0.00	- \$		250.0	0
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income No.	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	6,066	6.61	\$		3,054.	43
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income No.	10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	6.066.61	+ \$	7	7.701.92	= \$	13.768.53
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.			•		_		'		,	1 1	10,1 00.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{13,768.5}{\text{Combined monthly income}}\$ 13. Do you expect an increase or decrease within the year after you file this form? No.		Inclu othe Do r	ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe					Schedul		0.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No.		Writ	e that amount on the Summary of Schedules and Statistical Summary of Certain							\$	13,768.53
	13.	Do y	•	?							
☐ Yes. Explain: │		_									
			Yes. Explain:								

0.00

0.00

0.00

300.00

Fill in this inform	nation to identify your case:					
Debtor 1	Aric Richard Montgomery		Check	if this is:		
Debtor 2 (Spouse, if filing)	Charity Ann Montgomery		 ☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date: 			
United States Bar	okruptcy Court for the: MIDDLE DISTRICT OF NORTH C	CAROLINA		/M / DD / YYYY		
Case number(If known)						
	orm 106J					
Be as complete information. If	e J: Your Expenses e and accurate as possible. If two married people ar more space is needed, attach another sheet to this wn). Answer every question.					
	cribe Your Household					
1. Is this a jo □ No. Go						
_	bes Debtor 2 live in a separate household?					
	No Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate Househo	old of Debto	or 2.		
2. Do you ha	ive dependents?					
Do not list Debtor 2.	Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?	
Do not sta	te the			_	□ No	
dependent	s names.	Daughter		5	■ Yes □ No	
		Daughter		9	■ Yes	
					□ No	
		Son		11	■ Yes	
		Son		15	□ No ■ Yes	
expenses	xpenses include of people other than ind your dependents? No Yes	0011			■ Yes	
Part 2: Esti	mate Your Ongoing Monthly Expenses					
	expenses as of your bankruptcy filing date unless y f a date after the bankruptcy is filed. If this is a supp e.					
	ses paid for with non-cash government assistance in the contract of the contra			Your expe	enses	
	or home ownership expenses for your residence. In and any rent for the ground or lot.	nclude first mortgage	4. \$		0.00	
If not incl	uded in line 4:					
4a. Rea	l estate taxes		4a. \$		0.00	

4c. \$

4d. \$

5. \$

Property, homeowner's, or renter's insurance

4d. Homeowner's association or condominium dues

Home maintenance, repair, and upkeep expenses

Additional mortgage payments for your residence, such as home equity loans

		hard Montgomery Ann Montgomery C	ase num	ber (if known)	
6.	Utilities:				
		, heat, natural gas	6a.	· -	500.00
	6b. Water, se	wer, garbage collection	6b.	\$	75.00
	6c. Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	500.00
	6d. Other. Sp	ecify:	6d.	\$	0.00
7.	Food and hous	ekeeping supplies	7.	\$	1,600.00
8.	Childcare and	children's education costs	8.	\$	300.00
9.	Clothing, laund	lry, and dry cleaning	9.	\$	150.00
10.	Personal care p	products and services	10.	\$	150.00
11.	Medical and de	ntal expenses	11.	\$	400.00
12.	Transportation Do not include of	Include gas, maintenance, bus or train fare. ar payments.	12.	\$	600.00
13.	Entertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	140.00
14.	Charitable conf	tributions and religious donations	14.	\$	50.00
15.	15a. Life insura		15a.	·	0.00
	15b. Health ins		15b.	· : ———	70.00
	15c. Vehicle in		15c.	·	208.00
	15d. Other insu	· · ·	_ 15d.	\$	0.00
	Specify: Vehic		16.	\$	50.00
17.	Installment or I		47-	•	0.00
		ents for Vehicle 1	17a.	·	0.00
		ents for Vehicle 2	17b.	·	0.00
	17c. Other. Sp	·	17c.	·	0.00
18.	17d. Other. Sp Your payments	ecrry: of alimony, maintenance, and support that you did not report as	_ 17d.		0.00
	deducted from	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payment	s you make to support others who do not live with you.		\$	0.00
	Specify:		19.		
20.		erty expenses not included in lines 4 or 5 of this form or on Schedus on other property	ı le I: Yo 20a.		0.00
	20b. Real estat	• • •	20b.	·	0.00
		homeowner's, or renter's insurance	20c.	· -	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		ner's association or condominium dues	20e.	·	0.00
21	Other: Specify:	Pet	21.	· -	50.00
	Miscellaneou			+\$	200.00
		•	_	ΙΨ	200.00
22.		monthly expenses		\$	5.040.00
	22a. Add lines 4	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	5,343.00
				·	
		a and 22b. The result is your monthly expenses.		\$	5,343.00
23.	•	monthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	·	13,768.53
	23b. Copy you	r monthly expenses from line 22c above.	23b.	-\$	5,343.00
		our monthly expenses from your monthly income. t is your monthly net income.	23c.	\$	8,425.53
24.	For example, do yo	an increase or decrease in your expenses within the year after you ou expect to finish paying for your car loan within the year or do you expect your m terms of your mortgage?			e or decrease because of a
	☐ Yes.	Explain here:			

Fill in this i	information to identify your	case:			
Debtor 1	Aric Richard Mon	tgomerv			
	First Name	Middle Name	Las	Name	
Debtor 2	Charity Ann Mont	gomery			
(Spouse if, filing		Middle Name	Las	Name	
United State	es Bankruptcy Court for the:	MIDDLE DISTRICT OF I	NORTH CA	ROLINA	
Case numb	er				
(if known)					☐ Check if this is an
					amended filing
O((:-:-1 E	Tarres 400D a a				
Official F	Form 106Dec				
Decla	ration About a	n Individual	Debte	or's Schedules	12/15
If two marri	ed neonle are filing together	hoth are equally respon	neible for e	upplying correct information.	
ii two iiiaiii	ca people are ming together	, both are equally respon	ISIDIC IOI S	applying correct information.	
You must fil	le this form whenever you fi	le bankruptcy schedules	or amende	d schedules. Making a false stat	ement, concealing property, or
			ruptcy case	e can result in fines up to \$250,0	00, or imprisonment for up to 20
years, or bo	oth. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
	Ciana Balann				
	Sign Below				
Did		ana wha ia NOT an attam		fill and bankerintan farma?	
Dia yo	ou pay or agree to pay some	one who is NOT an attori	ney to neip	you fill out bankruptcy forms?	
■ N	lo				
ПΥ	es. Name of person			Attach Bar	nkruptcy Petition Preparer's Notice.
Ь.					n, and Signature (Official Form 119)
	penalty of perjury, I declare ey are true and correct.	that I have read the sumi	mary and s	chedules filed with this declarati	on and
that the	-, a a a a a a a a a a a a a a a a a a				
	Aric Richard Montgome	ry	X	/s/ Charity Ann Montgomery	1
	ic Richard Montgomery			Charity Ann Montgomery	
Sig	gnature of Debtor 1			Signature of Debtor 2	

Date September 13, 2022

Date September 13, 2022

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status?									
Debtor 2 (Speake, All, all, all) Charity Ann Montgomery First Name	Fill ir	n this infor							
Chack Charity Ann Montgomery Mode Name Last Name Last Name Chack If this is an amended filling	Debte	or 1					Last Namo		
United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA Case number (Idramen) Check if this is an amended filing Od/22 Check if this is an amended filing Od/22 O	Debte	or 2			ule Name	'	Lastivanie		
Case number Check if this is an amended filing Check if this is an amended filing					dle Name		Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/22 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income (Defore deductions and exclusions) Debtor 2 Sources of income (Check all that apply. (Jebore deductions and exclusions) Prom January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips	Unite	d States Ba	nkruptcy Court for the:	MIDDLE	DISTRICT OF N	NORTH (CAROLINA		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 24.22 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 27.11 38 39 30 30 30 30 30 30 30 30 30	Case	number							
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy as as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more representative and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more representative. The form of the top of any additional pages, write your name and case number (if known). Answer every question. Both is pour current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2 Prior Address: No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property interes and territories include Arizona, California, Idaho, Louisiana, Nevada, Nev Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Debtor 1 Sources of income (Check all that apply. Lived for eductions and exclusions) Debtor 2 Sources of income (Check all that apply. Lived for bankruptcy: Debtor 1 Sources of income (Check all that apply. Lived for bankruptcy: Debtor 1 Sources of income (Check all that apply. Lived for bankruptcy: Debtor 2 Sources of income (Check all that apply. Lived for bankruptcy: Debtor 3 Sources, tips \$0.00 Wages, commissions, bonuses, tips	(if knov	vn)						_	
Statement of Financial Affairs for Individuals Filing for Bankruptcy 3422 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? Debtor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Lipid you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Sources of income Check all that									amended ming
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 4 Sources of income (Check all that apply. Debtor 4 Sources of income (Check all that apply. Debtor 4 Sources of income (Check all that apply. Debtor 5 Sources of income (Check all that apply. Debtor 4 Sources of income (Check all that apply. Debtor 5 Sources of income (Check all that apply. Debtor 5 Sources of income (Check all that apply. Debtor 6 Sources									
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married	Sta	tement	of Financial	Affairs	for Indivi	duals	Filing for E	Bankruptcy	04/22
What is your current marital status? Married									
What is your current marital status?					sparate sneet to	this for	m. On the top of ar	iy additional pages, write yo	our name and case
What is your current marital status?	Part	1. Give I	Details About Your Ma	rital Status	s and Where You	u Livad I	Refore		
Married Not married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 lived there Debtor 2 Prior Address: Dived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Wages, commissions, bonuses, tips From January 1 of current year until Wages, commissions, bonuses, tips					sana Where Too	u Liveu i	Belore		
During the last 3 years, have you lived anywhere other than where you live now? No	1. V	Vhat is you	r current marital statu	is?					
Pebtor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Dates Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Dates Debtor 5 Dates Debtor 6 Debtor 6 Debtor 7 Debtor 8 Debtor 9 De	I	_							
Pebtor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Dates Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Dates Debtor 5 Dates Debtor 6 Debtor 6 Debtor 7 Debtor 8 Debtor 9 De). Г	Ouring the I	ast 3 years, have you	lived anyw	here other than	where v	ou live now?		
Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1:		ouring the i	aot o youro, navo you		noro otnor trian		, ou		
Debtor 1: Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 2 Ived there B. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No	Į	_							
Lived there Lived there Lived there Lived there Lived there	L	→ Yes. Lis	st all of the places you l	ived in the l	ast 3 years. Do n	ot includ	le where you live no	N.	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income I. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips		Debtor 1:					Debtor 2 Prior A	ddress:	
No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income L. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips									
□ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. □ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips	states	ana territor	ies include Arizona, Ca	iifornia, ida	no, Louisiana, Ne	evada, in	ew Mexico, Puerto F	rico, Texas, washington and	vvisconsin.)
Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips		_							
From January 1 of current year until the date you filed for bankruptcy: Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips	L	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Y	our Codebtors (O	Official Fo	orm 106H).		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pess. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips	Part	2 Expla	in the Sources of You	r Income					
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pess. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips	1 г	id you hay	e any income from en	nlovment	or from operation	na a hus	iness during this y	year or the two previous cale	andar vears?
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips	F	ill in the tota	al amount of income yo	u received	from all jobs and	all busin	esses, including par	t-time activities.	enual years:
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips	Г	□ No							
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips	Ī	_	I in the details.						
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$0.00 Wages, commissions, bonuses, tips				Dobtos 4				Dobtos 2	
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips The artificial training the date you filed for bankruptcy: Check all that apply. (before deductions and exclusions) Wages, commissions, bonuses, tips					of income	Gros	s income		Gross income
the date you filed for bankruptcy: bonuses, tips bonuses, tips						(befo	ore deductions and		(before deductions
По				-			\$0.00	=	\$44,785.50
				☐ Operat	ing a business			☐ Operating a business	

Aric Richard Montgomery Debtor 1 **Charity Ann Montgomery** Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$0.00 \$66,391.47 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2021) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$22,064.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 **Gross income from** Sources of income Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until VA Benefits \$56,627.00 **VA Benefits** \$20,290.00

the date you filed for bankruptcy:				,
	Social Security Benefits	\$13,172.00		
		\$0.00	Child Support	\$4,950.00
For last calendar year: (January 1 to December 31, 2021)	VA Benefits	\$54,732.00	VA Benefits	\$25,680.00
	Social Security Benefits	\$12,078.00		
		\$0.00	Withdrawal from retirement account	\$2,039.00
		\$0.00	Child Support	\$6,600.00
For the calendar year before that: (January 1 to December 31, 2020)	VA Benefits	\$54,000.00	VA Benefits	\$25,200.00
	Social Security Benefits	\$12,271.00		
		\$0.00	Child Support	\$6,600.00

Official Form 107

			l Montgomery Montgomery		Cas	se number (<i>if known</i>)	
Pa	rt 3: Lis	t Certain Pa	yments You Made Be	fore You Filed for Bankru	ptcy		
6.	Are eithe	Neither D	ebtor 1 nor Debtor 2 h	orimarily consumer debts has primarily consumer de , family, or household purpo	ebts. Consumer deb	ts are defined in 1	I U.S.C. § 101(8) as "incurred by an
		During the	90 days before you file	ed for bankruptcy, did you p		al of \$7,575* or mo	ore?
		□ No. □ Yes	paid that creditor. Do		omestic support obli		yments and the total amount you hild support and alimony. Also, do
	_	•	to adjustment on 4/01/2	25 and every 3 years after t	hat for cases filed on	or after the date o	of adjustment.
	■ Yes.			ave primarily consumer de ed for bankruptcy, did you p		al of \$600 or more	?
		□ No.	Go to line 7.				
		■ Yes		domestic support obligation			you paid that creditor. Do not Also, do not include payments to an
	Creditor	's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	201	fficer	entre Drive, Suite	06/2022, 07/2022	\$1,198.28	\$16,115.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Attn: O	Credit Un fficer ones Brand n, VA 2210	ch Drive	08/2022	\$2,875.00	\$45,032.37	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Insiders in of which y	nclude your i ou are an of	elatives; any general p ficer, director, person in	n control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	was an insider? bu are a general partner; corporations ny managing agent, including one fo ns, such as child support and
	■ No □ Yes.	List all payn	nents to an insider.				
		Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	insider?		you filed for bankrup		yments or transfer a	any property on a	ccount of a debt that benefited an
	■ No □ Yes.	List all pavn	nents to an insider				
		Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Ide	ntify Legal .	Actions, Repossessio	ons, and Foreclosures	•		

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody Case 22-50527 Doc 1 Filed 09/13/22 Page 60 of 82

Debto Debto			Case number	(if known)	
m	nodifications, and contract disputes.				
	No				
	_				
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
	Vithin 1 year before you filed for bank Check all that apply and fill in the details b		erty repossessed, foreclose	d, garnished, attached	I, seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.				
_	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happened	İ		property
11 W	Vithin 90 days before you filed for ban			stitution set off any a	mounts from your
	ccounts or refuse to make a payment		duning a bank of infancial in	stitution, set on any c	inounts from your
	No Yes. Fill in the details.				
	Creditor Name and Address	Describe the action the	creditor took	Date action was	Amount
				taken	
	Vithin 1 year before you filed for bank ourt-appointed receiver, a custodian,		erty in the possession of an	assignee for the bene	efit of creditors, a
	No				
	Yes				
Part 5	List Certain Gifts and Contribution	ons			
13. W	Vithin 2 years before you filed for bank	kruptcy, did you give any gifts	s with a total value of more	than \$600 per person?	?
	No				
_	Yes. Fill in the details for each gift.Gifts with a total value of more than \$	600 Describe the gifts		Dates you gave	Value
	per person	Describe the gifts		Dates you gave the gifts	value
	Person to Whom You Gave the Gift an Address:	nd			
14. W	Vithin 2 years before you filed for bank	kruptcy, did you give any gifts	s or contributions with a tot	al value of more than	\$600 to any charity?
	No				
L				Dates veu	Value
n	Gifts or contributions to charities that more than \$600	total Describe what you	Contributed	Dates you contributed	Value
	Charity's Name Address (Number, Street, City, State and ZIP Co	ode)			
Part 6	List Certain Losses				
	Vithin 1 year before you filed for bank or gambling?	ruptcy or since you filed for b	ankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	No				
	Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Describe any insurance co	_	Date of your loss	Value of property lost
•		Include the amount that insu insurance claims on line 33 of			1031

Official Form 107

Debtor 1 Aric Richard Montgomery
Debtor 2 Charity Ann Montgomery

Case number (if known)

Par	rt 7: List Certain Payments or Transfers					
	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepa Include any attorneys, bankruptcy petition prepar	aring a bankruptcy pe	tition?			erty to anyone you
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	alue of any proper	rty	Date payment or transfer was made	Amount of payment
	Duncan Law, LLP 628 Green Valley Rd. #304 Greensboro, NC 27408 DamonDuncan@DuncanLawOnline.co m	Attorney Fees: Filing Fee: \$31; Credit Counsel	3		09/2022	\$838.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you l	or to make payment			r transfer any prop	erty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	alue of any proper	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial aff le as security (such as	airs? the granting of a sec			
	Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you	Description and property transfer			nny property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		ny property to a sel	f-settled tru	st or similar device	of which you are a
	Name of trust	Description and	alue of the proper	ty transferre	ed	Date Transfer was
Par	tt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposi	t Boxes, and Stora	ge Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificates of			
	Yes. Fill in the details. Name of Financial Institution and	Last 4 digits of	Type of account	or Dat	e account was	Last balance
		account number	instrument	clo	sed, sold, ved, or nsferred	before closing or transfer

Case 22-50527 Doc 1 Filed 09/13/22 Page 62 of 82

9/13/22 12:38PM

	tor 2 Aric Richard Montgomery Charity Ann Montgomery	Case number (if known)					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acc instrument	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
	Woodforest Bank Attn: Officer 1330 Lake Robbins Drive The Woodlands, TX 77380	XXXX-4670	■ Checking □ Savings □ Money M □ Brokerag □ Other_	arket	06/2022	\$0.00	
	USAA Attn: Officer 10750 McDermott Freeway San Antonio, TX 78288	XXXX-3906	■ Checking □ Savings □ Money M □ Brokerag □ Other	arket	04/2022	\$0.00	
	Do you now have, or did you have within cash, or other valuables? No Yes, Fill in the details.	1 year before you filed	for bankruptcy,	any safe d	eposit box or other depo	sitory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had a Address (Numbe State and ZIP Code)	r, Street, City,	Describ	e the contents	Do you still have it?	
22.	Have you stored property in a storage un ■ No □ Yes. Fill in the details.	it or place other than yo	our home within	1 year befo	ore you filed for bankrup	tcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code	Who else has on to it? Address (Number State and ZIP Code)	r, Street, City,	Describ	e the contents	Do you still have it?	
Part	9: Identify Property You Hold or Cont	rol for Someone Else					
	Do you hold or control any property that for someone. No Yes. Fill in the details.	someone else owns? In	clude any prope	erty you bo	errowed from, are storing	for, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code	Where is the pi (Number, Street, Cit Code)		Describ	e the property	Value	
Part	110: Give Details About Environmental	Information					
	the purpose of Part 10, the following defining the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10,	ate, or local statute or re	-				

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 22-50527 Doc 1 Filed 09/13/22 Page 63 of 82

9/13/22 12:38PM

	tor 1 Aric Richard Montgomery tor 2 Charity Ann Montgomery	C	Case number (if known)	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable u	nder or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any enviro	nmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Cor	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have any	of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity, ei	ther full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		
	☐ An owner of at least 5% of the voting or	r equity securities of a corporation		
	■ No. None of the above applies. Go to Part	12.		
	☐ Yes. Check all that apply above and fill in t	the details below for each business.		
	Address	escribe the nature of the business	Employer Identification number Do not include Social Security I	
	Na	ame of accountant or bookkeeper	Dates business existed	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

☐ Yes. Fill in the details below.

Name

Address (Number, Street, City, State and ZIP Code)

Date Issued

Case 22-50527 Doc 1 Filed 09/13/22 Page 64 of 82

Debtor Debtor			Case number (if known)
Part 12	Sign Below		
are true with a b		atement,	nd any attachments, and I declare under penalty of perjury that the answers , concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Ario	c Richard Montgomery	/s/ Ch	narity Ann Montgomery
Aric R	ichard Montgomery	Charif	ty Ann Montgomery
Signati	ure of Debtor 1	Signat	ture of Debtor 2
Date	September 13, 2022	Date	September 13, 2022
Did you	attach additional pages to Your Statement of Fi	nancial /	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you	pay or agree to pay someone who is not an atto	rney to h	help you fill out bankruptcy forms?
■ No			
☐ Yes.	Name of Person . Attach the Bankruptcy Pet	ition Prer	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:					
Debtor 1	Aric Richard Montge	omery			
Debtor 2 (Spouse, if filing)	Charity Ann Montgo	emery			
United States E	Bankruptcy Court for the:	Middle District of North Carolina			
Case number (if known)					

Check	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 6,199.73 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 0.00 0.00 Copy here -> \$ Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property **Debtor 1** 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Case number (if known)

Aric Richard Montgomery

Charity Ann Montgomery

Debtor 1 Debtor 2

					Column Debtor		Column Debtor 2		
7. In t	terest. di	vidends, and royalties			\$	0.00	Φ.	0.00	
	•	ment compensation			\$	0.00	_	0.00	
Do	o not ente	•	at the amount received was a be	enefit under	·				
				0.00					
		spouse		0.00					
9. Pe be no Un dis pa do	ension or enefit unde ot include nited State sability, or ay paid un oes not ex	r retirement income. Do not in er the Social Security Act. Also any compensation, pension, pa es Government in connection w r death of a member of the unif- nder chapter 61 of title 10, then	clude any amount received that , except as stated in the next seay, annuity, or allowance paid b with a disability, combat-related ormed services. If you received include that pay only to the extent to which you would otherwise by	entence, do y the injury or any retired ent that it	\$	0.00) \$	0.00	
10. Inc Do red do Un dis	come from not included the control of the control o	om all other sources not listed ude any benefits received unde a a victim of a war crime, a crime errorism; or compensation, pens es Government in connection w	d above. Specify the source are referred to the Social Security Act; payme e against humanity, or internation, pay, annuity, or allowance with a disability, combat-related formed services. If necessary, lie	ents onal or paid by the injury or					
	CI	hild Support			\$	0.00) \$	550.00	
					\$	0.00) \$	0.00	
	То	tal amounts from separate pag	es, if any.	+	\$	0.00) \$	0.00	
	ach colum	your total average monthly in in. Then add the total for Colum ermine How to Measure Your		or 	0.0	<u> </u>	6,749.73		6,749.73 tal average onthly income
		total average monthly incom						. \$	6,749.73
13. 0	_	re not married. Fill in 0 below.	. one.						
		re married and your spouse is f	iling with you. Fill in 0 below						
_	_	re married and your spouse is r							
	Fill in t	the amount of the income listed	I in line 11, Column B, that was spouse's tax liability or the spou						
		, specify the basis for excluding ments on a separate page.	this income and the amount of	f income dev	voted to e	each purpo	se. If necessa	ıry, list addi	tional
	If this	adjustment does not apply, ente	er 0 below.	•					
	-			\$					
	_			—					
	-			Ψ					
		Total		\$		0.00	Copy here=>		0.00
14. Y		rent monthly income. Subtrac						\$	6,749.73

Debtor 1 Debtor 2	Aric Richard Montgomery Charity Ann Montgomery		Case number (if known)	
	Multiply line 15a by 12 (the number of months in	a year).		x 12
15	5b. The result is your current monthly income for the	e year for this part of	of the form	\$80,996.76
16. Ca l	Iculate the median family income that applies to y	ou. Follow these s	eteps:	
16a	a. Fill in the state in which you live.	NC	_	
16b	o. Fill in the number of people in your household.	6		
160	c. Fill in the median family income for your state and s To find a list of applicable median income amounts instructions for this form. This list may also be avai	s, go online using th		\$ 114,069.00
17. Ho	w do the lines compare?			
17a	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N			
17b	 Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcuyour current monthly income from line 14 a 	lation of Your Dis		
Part 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4))	
18. Co	py your total average monthly income from line 1	1.		\$ 6,749.73
cor spc	duct the marital adjustment if it applies. If you are need that calculating the commitment period under 1 buse's income, copy the amount from line 13. a. If the marital adjustment does not apply, fill in 0 on	1 U.S.C. § 1325(b)	use is not filing with you, and you (4) allows you to deduct part of your	-\$0.00
19k	o. Subtract line 19a from line 18.			\$6,749.73
20. Ca l	Iculate your current monthly income for the year.	Follow these step	s:	C 740 72
20a	a. Copy line 19b			\$6,749.73
	Multiply by 12 (the number of months in a year).			x 12
20b	b. The result is your current monthly income for the your	ear for this part of t	he form	\$80,996.76
200	c. Copy the median family income for your state and	size of household f	rom line 16c	\$114,069.00
21.	How do the lines compare?			
	Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the o	court, on the top of page 1 of this form, ch	neck box 3, The commitment
	Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise ord	ered by the court, on the top of page 1 of	this form, check box 4, The
Part 4:	Sign Below signing here, under penalty of perjury I declare that t	he information on t	his statement and in any attachments is	true and correct.
	d Aric Richard Montgomery	X	/s/ Charity Ann Montgomery	
	ric Richard Montgomery ignature of Debtor 1	_	Charity Ann Montgomery Signature of Debtor 2	
Dat	te September 13, 2022 MM / DD / YYYY		Date September 13, 2022 MM / DD / YYYY	
If y	ou checked 17a, do NOT fill out or file Form 122C-2.			

Debtor 1	Aric Richard Montgomery		
Debtor 2	Charity Ann Montgomery	Case number (if known)	
If vo	ou checked 17b, fill out Form 122C-2 and file it with this form. On lir	 ne 39 of that form, copy your current m	onthly income from line 14 above.

Debtor 1 Debtor 2 Aric Richard Montgomery
Charity Ann Montgomery

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2022 to 08/31/2022.

Non-CMI - VA Income

Source of Income: VA Disability

Income by Month:

6 Months Ago:	03/2022	\$4,718.91
5 Months Ago:	04/2022	\$4,718.91
4 Months Ago:	05/2022	\$4,718.91
3 Months Ago:	06/2022	\$4,718.91
2 Months Ago:	07/2022	\$4,718.91
Last Month:	08/2022	\$4,718.91
	Average per month:	\$4,718.91

Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	03/2022	\$1,097.70
5 Months Ago:	04/2022	\$1,097.70
4 Months Ago:	05/2022	\$1,097.70
3 Months Ago:	06/2022	\$1,097.70
2 Months Ago:	07/2022	\$1,097.70
Last Month:	08/2022	\$1,097.70
	Average per month:	\$1,097.70

Debtor 1 Debtor 2 Aric Richard Montgomery
Charity Ann Montgomery

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 03/01/2022 to 08/31/2022.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Hospice of Surry County

Income by Month:

6 Months Ago:	03/2022	\$5,823.86
5 Months Ago:	04/2022	\$8,350.01
4 Months Ago:	05/2022	\$5,283.50
3 Months Ago:	06/2022	\$5,953.00
2 Months Ago:	07/2022	\$5,547.00
Last Month:	08/2022	\$6,241.00
	Average per month:	\$6,199.73

Line 10 - Income from all other sources

Source of Income: Child Support

Income by Month:

6 Months Ago:	03/2022	\$550.00
5 Months Ago:	04/2022	\$550.00
4 Months Ago:	05/2022	\$550.00
3 Months Ago:	06/2022	\$550.00
2 Months Ago:	07/2022	\$550.00
Last Month:	08/2022	\$550.00
	Average per month:	\$550.00

Non-CMI - VA Income

Source of Income: VA Disability

Income by Month:

6 Months Ago:	03/2022	\$2,254.43
5 Months Ago:	04/2022	\$2,254.43
4 Months Ago:	05/2022	\$2,254.43
3 Months Ago:	06/2022	\$2,254.43
2 Months Ago:	07/2022	\$2,254.43
Last Month:	08/2022	\$2,254.43
	Average per month:	\$2,254.43

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of North Carolina

In re	Aric Richard Montgomery Charity Ann Montgomery		Case No.		
	<u> </u>	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	4,500.00	
	Prior to the filing of this statement I have received	l	\$	500.00	
	Balance Due			4,000.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mem	bers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the national states.	ames of the people sharing in the	compensation is atta	ched.	aw firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credid. d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secure of the secu	atement of affairs and plan which tors and confirmation hearing, an reduce to market value; exe tions as needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof;	iling of
5.	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.			es, relief from stay	actions or
		CERTIFICATION			
this b	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the d	ebtor(s) in
S	September 13, 2022	/s/ Damon T. Dun	can		
L	Date	Damon T. Duncar Signature of Attorne			
		Duncan Law, LLP	í		
		628 Green Valley Greensboro, NC 2			
		336-856-1234 Fa			
		DamonDuncan@l		e.com	
		Name of law firm			

United States Bankruptcy Court Middle District of North Carolina

In re	Aric Richard Montgomery Charity Ann Montgomery		Case No.	
		Debtor(s)	Chapter	13
The ab		FICATION OF CREDITOR M		of their knowledge.
Date:	September 13, 2022	/s/ Aric Richard Montgomery Aric Richard Montgomery Signature of Debtor		
Date:	September 13, 2022	/s/ Charity Ann Montgomery Charity Ann Montgomery		

Signature of Debtor

10 Cycles, LLC Attn: Officer 10501 Monroe Road Matthews, NC 28105

Ally Bank Attn: Officer 200 West Civic Centre Drive, Suite 201 Sandy, UT 84070

Ally Lending Attn: Officer PO BOx 9212 Old Bethpage, NY 11804

Apple Card Attn: Officer PO Box 7247 Philadelphia, PA 19170

Attn: Merrick Garland Attorney General of the U.S. US Department of Justice 950 Pennsylvania Avenue NW Washington, DC 20530-0001

Badcock Home Furniture & More Attn: Officer 1409 10th Street Lake Park, FL 33403

Bank of America Attn: Officer PO Box 110564 Durham, NC 27709

Boost Credit Line Attn: Officer 125 Mission Ranch Blvd. Chico, CA 95926

Capital One Attn: Officer PO Box 71083 Charlotte, NC 28272 Carson Smithfield LLC Attn: Officer PO Box 660702 Dallas, TX 75266

Conn's, Inc. Attn: Officer 2445 Technology Forest Blvd., Suite 800 The Woodlands, TX 77381

Credit First Attn: Officer PO Box 81344 Cleveland, OH 44188

Credit One Attn: Officer PO Box 60500 City of Industry, CA 91716

Cross River Bank Attn: Officer 885 Teaneck Road Teaneck, NJ 07666

Davidson County Tax Collector Attn: Officer or Managing Agent 913 Greensboro St. Lexington, NC 27292

Discover Attn: Officer PO Box 71242 Charlotte, NC 28272

Eloan Wearhouse Attn: Officer PO Box 1753 Hayward, WI 54843

Equifax, Inc Attn: Bankruptcy Notification P.O. Box 740241 Atlanta, GA 30374 Experian

Attn: Bankruptcy Notification

PO Box 9701 Allen, TX 75013

Finewise Bank Attn: Officer 756 E. Winchester Street, Suite 100 Salt Lake City, UT 84107

Flagstar Bank, FSB Attn: Officer 5151 Corporate Drive Troy, MI 48098

InDebted Attn: Officer PO BOx 1201 Farmington, MO 63640

Internal Revenue Service Attn: Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

Kevin Powell Motorsports
Attn: Officer

Klarna Attn: Officer PO Box 206487 Dallas, TX 75320

Kohl's Attn: Officer PO Box 60043 Charlotte, NC 28201

Milestone/GPS Attn: Officer P.O. Box 4499 Beaverton, OR 97076 MNET Financial Attn: Officer 95 Argonaut St. Suite 200 Aliso Viejo, CA 92656

Mohela / Dept. of Education Attn: Officer 633 Spirit Drive Chesterfield, MO 63005

NC Department of Revenue Attn: Bankruptcy Dept. Post Office Box 25000 Raleigh, NC 27640

OneMain Financial Group, LLC Attn: Officer 160 Mine Lake Ct. Ste. 200 Raleigh, NC 27615

OPP Loans Attn: Officer 130 E Randolph Street, Suite 3400 Chicago, IL 60601

PenFed Credit Union Attn: Officer 7940 Jones Branch Drive Mc Lean, VA 22102

Regional Finance Attn: Officer 5062 Peters Creek Parkway Winston Salem, NC 27127

Rosebud Lending LZO Zocaloans Attn: Officer PO BOx 1147 Mission, SD 57555

Royalty Attn: Officer 1411 Plaza West Road Winston Salem, NC 27103 Sessoms and Rogers PA Attn: Officer PO Box 110564 Durham, NC 27709

Spotloan Attn: Officer PO Box 720 Belcourt, ND 58316

SRS Motorsports, Inc. Attn: Officer 3112 Sands Dr. Greensboro, NC 27405

Synchrony Care Credit Attn: Officer PO Box 960061 Orlando, FL 32896

Synchrony Google Finance Attn: Officer PO Box 960061 Orlando, FL 32896

Transportation Alliance Bank Attn: Officer 4185 Harrison Blvd. Ogden, UT 84403

TransUnion Attn: Bankruptcy Notification P.O. Box 1000 Crum Lynne, PA 19022

United States Attorney's Office Middle District of North Carolina 101 S. Edgeworth Street - 4th Floor Greensboro, NC 27401

Upgrade Attn: Officer 2 N Central Avenue, 10th Floor Phoenix, AZ 85004 Verizon Attn: Officer PO Box 489 Newark, NJ 07101

Vive Attn: Officer 3605 Glenwood Avenue Suite 500 Raleigh, NC 27612

Wake Forest Ambulatory Ventures Attn: Officer PO Box 110564 Durham, NC 27709

Wake Forest Baptist Health Attn: Officer 1 Medical Center Boulevard Winston Salem, NC 27157

Wells Fargo Bank, National Association Attn: Officer 101 N. Phillips Avenue Sioux Falls, SD 57104